

rhondda  
borough



annual report  
1968



ANNUAL REPORT  
1968

RHONDDA BOROUGH



MEDICAL OFFICER  
OF HEALTH  
&  
BOROUGH SCHOOL  
MEDICAL OFFICER

R. B. Morley-Davies  
M.B., B.Ch., B.Sc., D.P.H.



R H O N D D A   B O R O U G H   C O U N C I L

HEALTH   AND   WELFARE   DEPARTMENT

ANNUAL   REPORT

1968

R. B. MORLEY - DAVIES

M.B., B.Ch., B.Sc., D.P.H.

Medical Officer of Health.



HEALTH COMMITTEE

THE MAYOR - Councillor S. H. L. Jones.

CHAIRMAN :-

Councillor L. G. Jones

MEMBERS :-

Alderman D. Murphy.	Councillor (Mrs.) G. Ellis
" (Mrs.) C. M. Parfitt, J.P.	" A. True
	" D. C. Davies
	" K. P. Thomas
	" H. Fox
	" R. J. Ashman
	" (Mrs.) P. H. Gard
	" <u>H. L. Davey</u>
	" W. J. Godfrey
	" C. R. Powell, B.E.M.
	" R. C. Morris

AND THE CHAIRMAN OF FINANCE COMMITTEE - Alderman W. D. Jones

---

HOUSING COMMITTEE

THE MAYOR - Councillor S. H. L. Jones

CHAIRMAN :-

Alderman D. Murphy

MEMBERS :-

Alderman (Mrs.) C. M. Parfitt, J.P.	Councillor (Mrs.) G. Ellis
	" A. True
	" D. C. Davies
	" K. P. Thomas
	" H. Fox
	" R. J. Ashman
	" (Mrs.) P. H. Gard
	" C. R. Powell, B.E.M.
	" <u>H. L. Davey</u>
	" W. J. Godfrey
	" R. C. Morris
	" L. G. Jones

AND THE CHAIRMAN OF FINANCE COMMITTEE - Alderman W. D. Jones.



RHONDDA HEALTH AND WELFARE SERVICES COMMITTEE

The Mayor - Councillor S. H. L. Jones

Chairman - Councillor (Mrs.) G. Ellis

All members of the Borough Council :-

Alderman I. I. Jones

" E. M. Davies  
" G. L. Wales. O.B.E., J.P.  
" A. Davies  
" S. Mitchell, O.B.E., J.P.,  
M.R.S.H.  
" W. D. Jones  
" R. D. Jayne  
" J. I. Evans  
" (Mrs.) C. M. Parfitt, J.P.  
" D. E. Hughes  
" D. Murphy

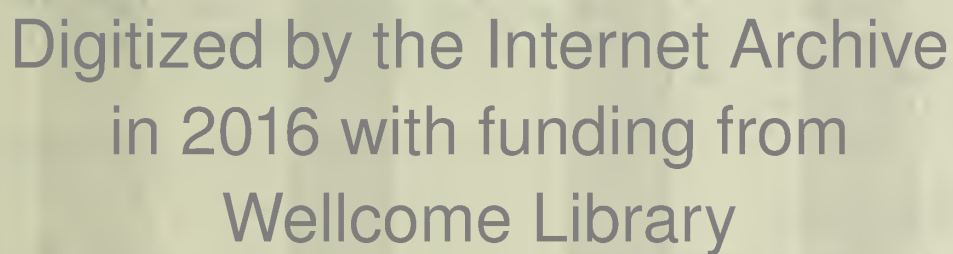
Councillor A. True

" J. H. Lewis  
" T. J. Davies  
" D. C. Davies  
" W. D. Hughes  
" R. B. Jarman  
" K. P. Thomas  
" J. G. Elias  
" B. J. Jones  
" H. Fox  
" D. L. Thomas  
" F. S. Tudball  
" R. J. Ashman  
" C. E. Winter  
" (Mrs.) B. Nicholas  
" (Mrs.) M. Davies  
" R. Newman  
" (Mrs.) A. Powell  
" (Mrs.) P. H. Gard  
" H. L. Davey  
" R. C. Lendrum  
" (Mrs.) O. J. Leebrook  
" H. R. Hicks  
" W. Woods  
" W. J. Godfrey  
" (Mrs.) M. E. Collins  
" D. Morgan  
" C. R. Powell  
" R. C. Morris  
" C. G. Carroll  
" L. G. Jones

Co-opted Members :-

Mr. L. B. Rothero  
Mrs. G. Burton  
Mrs. R. Mitchell  
Mrs. E. Richards  
Mrs. A. M. Vaughan  
Mrs. W. G. Williams  
Mrs. C. M. Wiltshire.





Digitized by the Internet Archive  
in 2016 with funding from  
Wellcome Library

<https://archive.org/details/b28875849>

Staff of the Health and Welfare Department

Medical Officer of Health

R. B. Morley-Davies, M.B., B.Ch., B.Sc., D.P.H.

Deputy Medical Officer of Health

Joy A. Mason, M.B., B.Ch., B.Sc., D.P.H.

Medical Officers

J. Morris, M.B., B.Ch., D.C.H., B.Sc., (Part Year)

O. J. Adelaja, M.B., B.S., (London) (Part Year)

Sessional Medical Officers

J. G. Mason, M.B., B.Ch., B.Sc.

N. C. Osborne, M.B., B.Ch.

A. L. Alban, M.R.C.S., L.R.C.P. (London)

G. Evans, M.R.C.S., L.R.C.P., F.P.H.

J. Williams, M.B., B.Ch., D.A., B.Sc.

R. K. Majumdar, M.B., B.Ch., B.Sc., D.P.H., D.I.H. (Part Year)

A. A. Khallaf, M.B., (Cairo) D.T.M. + H. (England) L.M.S.S.A. (London)

F. Soper, M.B., Ch.B.

W. M. Clifford, L.R.C.P. + S.I.

A. M. Lloyd, M.B., B.Ch.

Area Dental Officer

M. J. James-Ap-John, L.D.S., R.C.S.

Senior Dental Officer

T. J. Pugh, B.D.S.

Sessional Dental Officer

A. R. Owen, L.D.S., R.C.S.

Chief Public Health Inspector.

C. J. Bumford, T.D., M.A.P.H.I., M.R.S.H., A.M.I.P.H.E.

Chief Clerk

Selwyn Davies

Administrative Assistant (Health Services Section)

Glanffrwd Evans, A.C.I.S.

Area Welfare Officer (Welfare Services Section)

Mrs. Eurfron Evans (Certificate in Social Work)

Nursing Officer (Midwifery and Home Nursing)

Miss Iris Jones, S.R.N. S.Cm., S.R.F.N.  
Queen's Nursing Certificate

Nursing Officer (Health Visitors/School Nurses)

Miss Betty Owen S.R.N., S.C.M. S.R.F.N.  
H.V. Certificate.

Home Help Organiser

Miss M. E. Bowen, S.R.N., S.C.M.

Senior Chiropodist

W. J. Jones

Health Welfare Officers

E. J. Powell (Cert. of Recognition in Social Work)  
M. John, M.H.P.  
W. A. Evans, R.M.N.S.  
G. R. Gibbs, S.R.M.N. (Part year)  
M. D. Edmunds, S.R.M.N.  
M. A. Chaudhry - Certificate in Social Work (Part year)

Supervisor - Junior Training Centre

Mr. D. T. James, R.N.M.S.

Public Analyst

L. E. Coles, B.Pharm., P.H.D., F.P.S., F.R.I.C.

C O N T E N T S

<u>ENVIRONMENTAL HEALTH SERVICES</u>	<u>Page</u>
Statistical Summary ... ..	2
Population ... ..	5
Births ... ..	5
Infant Mortality ... ..	5
Deaths ... ..	6
Water Supply ... ..	11
Drainage and Sewerage ... ..	12
Closet Accommodation ... ..	12
Public Cleansing ... ..	12
Sanitary Inspection of Areas ... ..	12
Premises and occupations controlled by Byelaws, Regulations or Orders ... ..	14
Common Lodging Houses ... ..	14
Shops ... ..	15
Offices, Shops and Railway Premises Act ... ..	16
Accidents in Offices, Shops etc. ... ..	18
Improvement Grant Scheme ... ..	20
Factories ... ..	20
Rag Flock and Other Filling Materials Act, 1951 ... ..	22
Swimming Baths ... ..	22
Eradication of Bed Bugs... ..	23
Rats and Mice Destruction ... ..	23
Public Mortuaries ... ..	26
Scrap Metal Dealers ... ..	26
Legal Proceedings ... ..	26
Riding Establishments Act, 1964 ... ..	27
Animal Boarding Establishments Act, 1963 ... ..	28
Noise Abatement ... ..	28
Provision of houses by Council ... ..	29
Nuisances and defects remedied... ..	30
Housing Statistics ... ..	33
Rent Act ... ..	35
Slum Clearance ... ..	36
Milk ... ..	37
Ice-Cream ... ..	38
Meat ... ..	39
Other Foods ... ..	40
Poultry Processing ... ..	40
Unsound Food ... ..	41
Food and Drugs Act ... ..	41
Control of Food and Food Premises ... ..	46
Liquid Egg (Pasteurisation) Regulations, 1963 ... ..	47
Pesticide residues in foodstuffs ... ..	47
Incidence of certain Infectious Diseases ... ..	49
Tuberculosis ... ..	52
Services for the Aged ... ..	53
Laboratory Facilities ... ..	59
Hospital Facilities ... ..	59
National Assistance Act, 1948 - Section 47 ... ..	59

PERSONAL HEALTH SERVICES	Page
Scheme of Delegation	61
Ante-Natal Care	62
Unmarried Mothers	63
Birth Control Clinic	65
Infant Welfare Clinics	66
Dental Treatment	67
Testing for Phenylketonuria	70
Midwifery Service	70
Health Visiting Service	71
Nurseries and Child Minders Regulations Act, 1948	73
Home Nursing Service	75
Vaccination and Immunisation	76
Prevention of Illness - Care and After-Care	79
Health Education	80
Smoking and Health	82
Prevention of Accidents	84
Problem Families	85
Tuberculosis	85
Chiropody Service	88
Provision of Convalescence	90
Medical Comforts	91
Home Help Service	92
Mental Health Service	93
<b>WELFARE SERVICES</b>	
Foreward	97
Residential Accommodation	98
Ordinary Residence	100
Accommodation provided by Voluntary Organisations	100
Homes for the Aged - Establishment	100
Staff Training	100
Annual Outings, Holidays and Amenities for residents of homes	101
Temporary Accommodation	103
Temporary Intermediate Accommodation	104
The Handicapped Person	105
Staff Establishment	107
General information on the Welfare of the Handicapped Person	107
Glamorgan Blind Welfare Association	108
Aids and Materials issued to Blind and Generally Handicapped	108
Employment and Training of Handicapped Persons	110
Social/Handicraft Centres	110
Works of Adaptation	111
Welfare of the Deaf, Hard of Hearing and Deaf/Blind	112



T A B L E S

<u>ENVIRONMENTAL HEALTH SERVICES</u>		<u>Page</u>
TABLE 1	Deaths of infants under 1 year ... ..	5
TABLE 2	Distribution of deaths by cause and age together with a gross division by sex ...	6
TABLE 3	Deaths by age, sex and month of occurrence ...	7
TABLE 4	Deaths by age, sex and month of occurrence (Home or Hospital) ... ..	8
TABLE 5	Percentage of deaths occurring in Hospital by age and sex	8
TABLE 6	Causes of deaths (S.D.25 - Registrar General)...	9
TABLE 7	Average daily consumption of water ... ..	11
TABLE 8	Closet accommodation ... ..	12
TABLE 9	Details of Sanitary inspection of area ... ..	13
TABLE 10	Premises and occupations controlled by byelaws, regulations or orders ... ..	14
TABLE 11	Certain details of Shops and Employees ... ..	15
TABLE 12	Premises registered under Offices, Shops and Railway Premises Act, 1963 ... ..	16
TABLE 13	Analysis of persons employed in registered premises	17
TABLE 14	Accidents in Offices, Shops, etc. ... ..	18
TABLE 15	Contraventions of Offices, Shops etc. Act ...	19
TABLE 16	Premises affected by the Factories Act, 1961 ...	20
TABLE 17	Details of inspection of premises to which Factories Act applies ... ..	21
TABLE 18	Defects found in premises to which Factories Act applies ... ..	21
TABLE 19	Details of Outwork in Area ... ..	22
TABLE 20	Information regarding prevalence of rats and mice	24
TABLE 21	Rodent Control - Sewer Treatment ... ..	25
TABLE 22	Legal proceedings under Public Health Act, 1936	26
TABLE 23	Location of new houses passed for occupation by Council ... ..	29
TABLE 24	Provision of houses by Council ... ..	30
TABLE 25	Housing - Nuisances and defects remedied ...	30
TABLE 26	Summary of Housing Statistics ... ..	33
TABLE 27	Applications for Certificates of Disrepair ...	35
TABLE 28	Details of Slum Clearance Areas and families rehoused ... ..	36
TABLE 29	Details of Licences to use special designation in relation to milk ... ..	38
TABLE 30	Inspection of carcasses of animals slaughtered in the district ... ..	39
TABLE 31	Percentages of carcasses inspected affected with tuberculosis ... ..	40
TABLE 32	Principal articles of food condemned ... ..	41
TABLE 33	Samples of food and drugs submitted to Public Analyst for examination ... ..	42
TABLE 34	Details of Samples reported upon by Public Analyst as not genuine ... ..	43

TABLE 35	Main categories of premises from which food is sold ... ..	46
TABLE 36	Infectious diseases notified ... ..	49
TABLE 37	Distribution by age-group and sex of new notifications and deaths from tuberculosis	52
TABLE 38	Meals provided under Meals on Wheels Service	54
TABLE 39	Meals provided at Nazareth Centre ...	55
TABLE 40	Meals provided at "Combine" House ...	56
TABLE 41	Meals provided at "Teify House" ... ..	57

PERSONAL HEALTH SERVICES

TABLE 42	Attendances at Ante-Natal Clinics ...	62
TABLE 43	Details of premature Births ... ..	64
TABLE 44	Distribution of Welfare Foods ... ..	67
TABLE 45	Visits for Dental Treatment ... ..	68
TABLE 46	Notification of Births ... ..	71
TABLE 47	Visits by Health Visitors ... ..	74
TABLE 48	Visits by Home Nurses ... ..	76
TABLE 49	Vaccination - completed primary courses	78
TABLE 50	Vaccination - re-inforcing doses ...	79
TABLE 51	Use of films for School Health Education	80
TABLE 52	Use of films for General Health Education	81
TABLE 53	Deaths from bronchitis	83
TABLE 54	Deaths from lung cancer ... ..	83
TABLE 55	Deaths attributed to accidents in the home	84
TABLE 56	Notification of Respiratory Tuberculosis by Sex and Age ... ..	86
TABLE 57	B.C.G. Vaccination of School Children ...	87
TABLE 58	Patients receiving Chiropody Treatment	89
TABLE 59	Chiropody Case Load ... ..	90
TABLE 60	Categories of Applicants granted Home Helps	92
TABLE 61	Number of Mentally Handicapped Patients	94
TABLE 62	Number of Mentally Ill and Mentally Handicapped Patients ... ..	95
TABLE 63	Mentally Ill Patients referred to local health authority ... ..	95
TABLE 64	Subnormal and severely Subnormal Patients referred to local health authority ...	96
TABLE 65	Community Care Visits by Health Welfare Officers	96

WELFARE SERVICES

TABLE 66	Admissions to and Discharges from Residential Homes	99
TABLE 67	Classification of residents at Homes ...	99
TABLE 68	Persons in Special Homes run by voluntary organisations ... ..	100
TABLE 69	Main categories of Handicapped persons registered	105
TABLE 70	Number of Handicapped Persons on Register	105
TABLE 71	Partially sighted persons on Register ...	106



		<u>Page</u>
TABLE 72	Blind Persons registered ... ..	106
TABLE 73	General Classes of disability of Handicapped persons registered ... ..	113
TABLE 74	Major Handicaps of Persons registered	114
TABLE 75	Social/Handicraft Centres for the Blind..	115
TABLE 76	Social/Handicraft Centres for the Handicapped	115
TABLE 77	Number of Visits made by Social Welfare Officers	116
TABLE 78	Case Loads of Social Welfare Officers ...	117

- 1 -

Health and Welfare Department,  
Tydfil House,  
PENTRE, Rhondda.

TO THE MAYOR, ALDERMEN AND COUNCILLORS  
OF THE BOROUGH OF RHONDDA.

7th July, 1970.

Mr. Mayor, Ladies and Gentlemen,

I have the privilege to submit for your consideration my  
Annual Report for 1968.

Once again, the routine work of the Department was greatly  
facilitated by the interest of members and the co-operation of other  
Chief Officers of the Council. The staff of my own Department continued  
to give me their most loyal support and assistance during the year.

Yours sincerely,

A handwritten signature in dark ink, appearing to read "A. M. Jones". The signature is written in a cursive style with a large initial "A" and a long, sweeping underline.

B O R O U G H   O F   R H O N D D A

STATISTICAL SUMMARY FOR THE YEAR 1968

Area ... ..	...	...	...	...	23,886 Acres
Population (Census (1961) ... ..	...	...	...	...	100,314
Population (Estimate as at mid-year 1968)	...	...	...	...	95,590
Population (Estimate as at mid-year 1967)	...	...	...	...	96,450
Decrease in Estimated population 1967-1968	...	...	...	...	860
Estimated number of inhabited houses ... ..	...	...	...	...	30,159
					Rate per 1,000
	<u>Males</u>	<u>Females</u>	<u>Total</u>		<u>population.</u>
Live Births (as per S.D.52)	675	645	1,320		13.8
(Comparability Factor of 1.03 gives Adjusted Birth Rate - 14.2 per 1,000)					
(No. of live Births notified during 1968 was 1,335).					
Illegitimate live births - 87 which is 6.6 per cent of total live births.					
					Rate per 1,000
					<u>total live and</u>
					<u>stillbirths</u>
Stillbirths (as per S.D.52)	13	11	24		18
Total live and stillbirths	688	656	1,344		
					Rate per 1,000
Infant Deaths (as per S.D.52)					<u>total live births</u>
<u>Under 1 year</u>	24	15	39		30
					Rate per 1,000
					<u>legitimate live</u>
					<u>births</u>
<u>Legitimate</u>	23	15	38		30.8
					Rate per 1,000
					<u>illegitimate live</u>
					<u>births</u>
<u>Illegitimate</u>	1	-	-		11.5
					Rate per 1,000
Neo-natal Mortality (as per S.D.52)					<u>total live births</u>
<u>Under 4 weeks</u>	20	11	31		23.5
Early Neo-natal Mortality (as per S.D.52)					
<u>Under 1 week</u>	18	8	26		19.7
					Rate per 1,000
Perinatal Mortality(as per S.D.52)					<u>total and still-</u>
					<u>births</u>
Stillbirths and deaths					
<u>under 1 week</u>	31	19	50		37
Maternal Mortality (including abortion)	N I L				
	<u>Males</u>	<u>Females</u>	<u>Total</u>		<u>Rate per 1,000</u>
					<u>population</u>
Deaths (Registrar General's					
Return - S.D.25)	765	639	1,404		14.7
(Adjusted Death Rate - 16.8)					
Deaths (Registered in District)	758	631	1,389		

- 3 -

SECTION 1

GENERAL AND VITAL STATISTICS

	Estimated Population 1968	Live Births			Ratio of local adjusted rate to national rate	Deaths			Ratio of local adj- usted death rate to Nat. rate	INFANT MORTALITY		PERINATAL MORTALITY		STILL- BIRTHS	
		No. of live births	Rate per 1,000 Popu- lation			No. of Deaths	Rate per 1,000 Popu- lation			Deaths under one year	Rate per 1000 live births	Still- births and deaths under one week	Rate per 1000 live and still births	No. of still- births per 1000 births	Still births rate per 1000 births
			Crude	Adj- usted			Crude	Adj- usted							
England and Wales	48,593,000	822,000	16.9			577,000	11.9			18		25		14	
Administrative County	742,920	12,225	16.5	17.0	1.01	9,285	12.5	14.3	1.20	254	21	372	30	212	17
Urban Districts	524,650	8,215	15.7	16.2	0.96	6,723	12.3	14.6	1.23	185	23	270	32	151	18
Rural Districts	218,270	4,010	18.4	18.8	1.11	2,562	10.0	13.6	1.14	69	17	102	25	61	15
Health Division															
Constituent Districts															
Aberdare and Mountain Ash	38,560	679	17.6	19.2	1.14	586	15.2	15.2	1.28	19	28	19	28	6	9
Caerphilly and Gelligaer	39,130	442	15.7	15.7	0.93	369	13.1	15.9	1.33	9	20	20	44	13	29
Mid Glamorgan	34,640	774	19.8	19.4	1.15	452	11.6	14.4	1.21	22	28	27	34	13	17
	15,190	616	17.8	17.8	1.05	409	11.8	15.3	1.29	12	19	12	19	6	10
	21,280	188	12.4	12.8	0.76	156	10.3	11.1	0.93	3	16	8	41	5	26
	20,390	340	16.0	16.6	0.98	268	12.6	15.5	1.30	4	12	10	29	8	23
	13,120	327	16.0	16.5	0.98	262	12.8	15.6	1.31	7	21	12	36	6	18
	49,310	206	15.7	18.5	1.10	177	13.5	10.8	0.91	4	19	3	14	1	5
	29,910	1,052	21.3	20.4	1.21	607	12.3	11.7	0.98	21	20	32	30	18	17
	40,960	366	12.9	13.4	0.79	390	13.0	13.9	1.17	10	26	14	36	8	20
	31,800	652	15.9	16.5	0.98	519	12.7	15.4	1.29	16	25	17	26	8	12
	35,060	742	23.3	24.0	1.42	352	11.1	15.3	1.29	12	16	18	24	12	16
	9,480	547	15.6	15.9	0.94	470	13.4	13.9	1.17	12	22	16	29	6	11
	51,310	185	19.5	18.9	1.12	104	11.0	16.2	1.36	9	49	10	52	6	31
	42,450	756	14.7	14.6	0.86	557	10.9	14.8	1.25	17	22	27	35	15	19
	28,030	636	15.0	15.5	0.91	462	10.9	12.0	1.01	6	9	13	20	12	19
	1,350	536	19.1	17.6	1.04	338	12.1	13.3	1.12	8	15	9	17	5	9
	22,530	35	25.9	25.6	1.52	11	8.1	8.4	0.71	-	-	1	28	1	28
	22,960	363	16.1	18.4	1.09	167	7.4	13.0	1.09	5	14	9	24	7	19
	15,960	370	16.1	17.4	1.03	325	14.2	13.4	1.12	5	14	12	32	9	24
	26,080	256	16.0	16.8	0.99	171	10.7	12.0	1.01	2	8	4	16	2	8
	29,680	408	15.6	16.7	0.99	321	12.3	13.5	1.14	7	17	16	38	12	29
		409	13.8	15.6	1.38	408	13.7	14.3	1.20	5	12	13	31	9	22
	95,590	1,320	13.8	14.2	0.84	1,404	14.7	16.8	1.41	39	30	50	37	24	18
	</														



## Population

The Registrar-General's estimate of the mid'year population of the Borough in 1968 showed a decrease of 860 over that of the previous year, resulting in a natural decrease of 84.

## Births

Live births notified during 1968 (as per S.D.52) numbered 1,320 giving an adjusted birth rate of 14.22. 24 babies were still-born giving a still-birth rate of 18.

## Infant Deaths

39 infants aged under 1 year died during 1968. The distribution of these deaths by age and cause is shown on Table 1.

TABLE 1

TABLE SHOWING DISTRIBUTION OF DEATHS OF INFANTS  
UNDER ONE YEAR BY AGE AND CAUSE.

	WEEKS						MONTHS						All Cases
	0-		1 -		1-		3-		6-		9-1yr.		
	M	F	M	F	M	F	M	F	M	F	M	F	
Congenital Defects of Central Nervous System	-	2	-	1	1	-	-	-	1	-	-	-	5
Congenital Defect of Cardio Vascular System	3	1	-	1	-	-	-	-	-	-	-	-	5
Congenital Defect of Alimentary System	1	-	-	-	-	-	-	-	-	-	-	-	1
Pneumonia	2	-	-	-	-	1	-	-	-	-	-	-	3
Bronchitis	-	-	-	-	1	-	-	-	-	-	-	-	1
Gastro Enteritis	-	-	-	-	-	-	-	-	-	-	-	-	-
Prematurity	5	2	-	1	-	1	-	-	-	-	-	-	9
Atelectasis	3	-	-	-	-	-	-	-	-	-	-	-	3
Prematurity and Atelectasis	3	1	-	-	-	-	-	-	-	-	-	-	4
Accident	-	-	-	-	-	-	-	-	-	-	-	-	-
Others	2	2	1	-	1	1	-	1	-	-	-	-	8
All Causes	19	8	1	3	3	3	-	1	1	-	-	-	39

# DEATHS

Table 2 shows the distribution of deaths during the year by cause and age, together with a gross division by sex. (Classified by cause at Health Department)

TABLE 2

				Deaths in or belonging to the whole District at subjoined ages.											
				All Ages	Under 1 Year	1 and under 2	2 and under 5	5 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and under 75	75 and up-ward		
Cols 1				2	3	4	5	6	7	8	9	10	11		
All Causes		(Certified (Uncertified		M	F	1,389	39	2	3	3	10	41	320	420	551
1. Tuberculosis, respiratory				13	2	15	-	-	-	-	-	1	7	5	2
2. Tuberculosis, other				-	1	1	-	-	-	-	-	-	1	-	-
3. Syphilitic disease				-	-	-	-	-	-	-	-	-	-	-	-
4. Diphtheria				-	-	-	-	-	-	-	-	-	-	-	-
5. Whooping Cough				-	-	-	-	-	-	-	-	-	-	-	-
6. Meningococcal infection				-	-	-	-	-	-	-	-	-	-	-	-
7. Acute Poliomyelitis				-	-	-	-	-	-	-	-	-	-	-	-
8. Measles				-	-	-	-	-	-	-	-	-	-	-	-
9. Other infective and parasitic diseases				2	-	2	1	-	-	-	-	-	-	-	1
10. Malignant neoplasm-stomach				20	24	44	-	-	-	-	-	2	11	17	14
11. Malignant neoplasm-lung				39	6	45	-	-	-	-	-	3	20	16	6
12. Malignant neoplasm-breast				-	21	21	-	-	-	-	-	1	12	5	3
13. Malignant neoplasm-uterus				-	10	10	-	-	-	-	-	1	5	2	2
14. Other malignant and lymphatic neoplasms				62	53	115	-	1	-	-	1	3	32	38	40
15. Leukaemia, aleukaemia				5	3	8	-	-	-	2	-	-	3	2	1
16. Diabetes				3	8	11	-	-	-	-	-	-	3	2	6
17. Vascular lesions of nervous system				92	127	219	-	-	-	-	-	3	26	59	131
18. Coronary disease, angina				200	122	322	-	-	-	-	-	9	92	118	108
19. Hypertension with heart disease.				10	5	15	-	-	-	-	-	1	6	5	3
20. Other heart disease				42	64	106	-	-	1	-	1	4	11	28	61
21. Other circulatory disease				20	33	53	-	-	-	-	-	1	16	19	17
22. Influenza				5	5	10	-	-	-	-	-	-	-	2	8
23. Pneumonia				32	35	67	4	1	1	-	-	-	4	18	39
24. Bronchitis				79	15	94	-	-	-	-	-	1	21	34	38
25. Other diseases of respiratory system				45	6	51	4	-	-	-	-	1	19	17	10
26. Ulcer of stomach and duodenum				5	1	6	-	-	-	-	-	1	2	1	2
27. Gastritis, enteritis and diarrhoea				1	4	5	-	-	1	-	1	1	-	2	-
28. Nephritis and nephrosis				1	3	4	-	-	-	-	-	1	1	2	-
29. Hyperplasia of prostate				6	-	6	-	-	-	-	-	-	-	4	2
30. Pregnancy, childbirth and abortion				-	-	-	-	-	-	-	-	-	-	-	-
31. Congenital malformations				8	7	15	13	-	-	-	-	1	-	1	-
32A.Rheumatic fever				-	2	2	-	-	-	-	-	-	2	-	-
32B.Pernicious anaemia				-	1	1	-	-	-	-	-	-	-	1	-
32C.Convulsions				-	-	-	-	-	-	-	-	-	-	-	-
32D. Old age				12	24	36	-	-	-	-	-	-	-	2	34
32E.Other defined and ill defined diseases				33	30	63	17	-	-	1	1	4	13	18	9
33. Motor vehicle accidents				3	1	4	-	-	-	-	3	-	1	-	-
34A.Road (other than motor accidents).				1	-	1	-	-	-	-	-	-	-	1	-
34B.Colliery accidents				3	-	3	-	-	-	-	1	1	1	-	-
34C.All other accidents				14	16	30	-	-	-	-	2	1	7	1	19
35. Suicide				2	2	4	-	-	-	-	-	-	4	-	-
36. Homicide and operations of war				-	-	-	-	-	-	-	-	-	-	-	-
37. Cause unknown				-	-	-	-	-	-	-	-	-	-	-	-
RHONDDA				758	631	1389	39	2	3	3	10	41	320	420	551

Number of deaths registered in Rhondda in 1968	809
Number of deaths registered of persons normally resident outside Rhondda	51
Number of deaths of Rhondda residents that occurred outside the district	631
Actual number of registered deaths allocated to the district	1,389
Crude death rate for Rhondda	14.7 per 1,000 population
Crude death rate for County of Glamorgan	12.5 per 1,000 population



TABLE 3

Distribution of Deaths by age, sex and month  
of occurrence

Month of Death	AGE GROUP AND SEX																		All Ages
	0-		1-		2-		5-		15-		25-		45-		65-		75+		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
January	2	1	-	-	-	-	-	-	1	-	3	4	18	12	41	16	38	44	180
February	2	3	-	-	-	1	1	-	-	-	2	1	15	11	17	11	19	16	99
March	6	1	-	1	-	-	-	1	-	2	3	1	20	9	30	20	31	46	171
April	3	2	-	-	-	-	-	-	-	-	1	2	19	7	21	10	25	19	109
May	1	-	-	-	-	-	-	-	2	-	3	1	6	11	11	12	19	17	83
June	2	1	-	-	-	-	-	-	1	-	1	-	26	14	14	11	17	37	124
July	1	1	-	-	-	-	-	-	-	-	2	1	15	7	10	10	17	22	86
August	-	2	-	-	-	-	-	-	2	-	2	2	16	11	23	17	19	21	115
September	1	2	-	-	-	-	1	-	-	1	3	2	18	4	18	18	13	17	98
October	2	2	-	-	-	-	-	-	-	-	1	-	21	11	26	11	12	19	105
November	1	-	-	-	2	-	-	-	1	-	2	-	15	9	20	19	22	22	113
December	3	-	-	1	-	-	-	-	-	-	1	3	16	9	18	16	13	26	106
Total	24	15	-	2	2	1	2	1	7	3	24	17	205	115	249	171	245	306	1389

TABLE 4

Distribution of Deaths by age, sex and place of occurrence (Home or Hospital)

AGE GROUP										All Ages
0-	1-	2-	5-	15-	25-	45-	65-	75+		
<u>DOMICILIARY DEATHS</u>										
M	4	-	2	-	4	12	112	114	106	254
F	5	-	-	-	1	12	59	82	127	286
Total	9	-	2	-	5	24	171	196	233	540
<u>HOSPITAL DEATHS</u>										
M	20	-	-	2	3	12	93	135	139	404
F	10	2	1	1	2	5	56	89	179	345
Total	30	2	1	3	5	17	149	224	318	749
<u>TOTAL DEATHS</u>										
M	24	-	2	2	7	24	205	249	245	758
F	15	2	1	1	3	17	115	171	306	631
Total	39	2	3	3	10	41	320	420	551	1,389

TABLE 5

Percentage of all Deaths occurring in Hospital by age and sex.

Age-Group	Males	Females	Total
0-	83	66	77
1-	45	86	61
25-	50	29	41
45-	45	49	47
65-	54	52	53
75+	56	58	58
All Ages	53	55	54

TABLE 6

TABLE S.D. 25 of the Registrar General.

Causes of Death in Rhondda Borough during 1968.

B List No.	Causes of Death	Males	Females
	All Causes	765	639
B1	Cholera .. .. .	-	-
B2	Typhoid Fever .. .. .	-	-
B3	Bacillary dysentery and amoebiasis .. .. .	-	-
B4	Enteritis and other diarrhoeal diseases .. .. .	-	2
B5	Tuberculosis of respiratory system .. .. .	9	1
B6	Other tuberculosis incl. late effects .. .. .	-	-
B7	Plague .. .. .	-	-
B8	Diphtheria .. .. .	-	-
B9	Whooping cough .. .. .	-	-
B10	Streptococcal Sore throat and scarlet fever .. .. .	-	-
B11	Meningococcal infection .. .. .	-	-
B12	Acute poliomyelitis .. .. .	-	-
B13	Smallpox .. .. .	-	-
B14	Measles .. .. .	-	-
B15	Typhus and other rickettsioses .. .. .	-	-
B16	Malaria .. .. .	-	-
B17	Syphilis and its sequelae .. .. .	1	-
B18	Other infective and parasitic diseases .. .. .	2	-
B19(1)	Malignant Neoplasm - stomach .. .. .	18	24
B19(2)	Malignant neoplasm - lung, bronchus .. .. .	36	8
B19(3)	Malignant neoplasm - breast .. .. .	-	20
B19(4)	Malignant neoplasm - uterus .. .. .	-	9
B19(5)	Leukaemia .. .. .	5	3
B19(6)	Other malignant neoplasms etc. .. .. .	54	49
B20	Benign and unspecified neoplasms .. .. .	1	3
B21	Diabetes Mellitus .. .. .	3	7
B22	Avitaminoses and other nutritional deficiency .. .. .	-	-
B23	Anaemias .. .. .	-	2
B24	Meningitis .. .. .	-	1
B25	Active rheumatic fever .. .. .	-	-
B26	Chronic rheumatic heart disease .. .. .	3	14
B27	Hypertensive disease .. .. .	14	24
B28	Ischaemic heart disease .. .. .	218	153
B29	Other forms of heart disease .. .. .	33	46
B30	Cerebrovascular disease .. .. .	96	129
B31	Influenza .. .. .	4	5
B32	Pneumonia .. .. .	32	31
B33(1)	Bronchitis and emphysema .. .. .	89	19
B33(2)	Asthma .. .. .	1	1
B34	Peptic ulcer .. .. .	6	1
B35	Appendicitis .. .. .	-	-
B36	Intestinal obstruction and hernia .. .. .	3	3
B37	Cirrhosis of liver .. .. .	4	4
B38	Nephritis and Nephrosis .. .. .	-	1
B39	Hyperplasia of prostate .. .. .	7	-
B40	Abortion .. .. .	-	-
B41	Other complications of pregnancy, etc. .. .. .	-	-
B42	Congenital anomalies .. .. .	8	8
B43	Birth injury, difficult labour, etc. .. .. .	5	2
B44	Other causes of perinatal mortality .. .. .	8	3
B45	Symptoms and ill-defined conditions .. .. .	3	6
B46(1)	Other endocrine etc. diseases .. .. .	1	-
B46(2)	Other diseases of blood, etc. .. .. .	-	1
B46(3)	Mental disorders .. .. .	-	-
B46(4)	Other diseases of nervous system, etc. .. .. .	4	5
B46(5)	Other diseases of circulatory system .. .. .	17	14
B46(6)	Other diseases of respiratory system .. .. .	47	6
B46(7)	Other diseases of digestive system .. .. .	2	3
B46(8)	Other diseases, genito-urinary system .. .. .	5	6
B46(9)	Diseases of skin, subcutaneous tissue .. .. .	-	1
B46(10)	Diseases of musculo-skeletal system .. .. .	1	4
B47	Motor vehicle accidents .. .. .	6	2
B48	All other accidents .. .. .	15	15
B49	Suicide and self-inflicted injuries .. .. .	2	2
B50	All other external causes .. .. .	2	1



SECTION II

SANITARY CIRCUMSTANCES

WATER

The District derives the major part of its water supply from one main water undertaking. The Taf Fechan Water Board serves the whole of the district, with the exception of the greater portion of Cwmparc, which is supplied by the National Coal Board, and small groups of houses at Pontygwaith, Ynyshir and Penrhiwfer.

The District Engineer has provided the details in the following Table 7 regarding water consumption in the area supplied by the Water Board's services :-

TABLE 7

Average daily consumption of water in  
the Council's area of supply.

(a)	For trade purposes .. .. .	514,000	galls.
(b)	For domestic purposes .. .. .	2,301,000	"
(c)	As compensation water .. .. .	-	"
(d)	To Neath R.D.C. (Bulk) .. .. .	46,000	"
		<u>2,861,000</u>	<u>"</u>

Number of new services installed during the year giving the  
number and situation of any groups of houses connected.

Baglan Street, Treherbert .. .. .	7
Windsor Place, Pentre .. .. .	9
Nantgwyddon Close, Gelli .. .. .	6
Ynyscynon Road, Trealaw .. .. .	31
New services to new properties .. .. .	10
New services to old properties .. .. .	59

Of the bacteriological examination of samples, seven of the nine samples obtained from various points on the system of distribution were reported on as being satisfactory. Three samples submitted for chemical examination were also found to be satisfactory.



## DRAINAGE AND SEWERAGE

During the year 63 defective sewers, formerly known as combined drains involving 445 houses, were referred to the Borough Surveyor for attention after the service of statutory notices on the owners and in cases where immediate action was necessary in accordance with the provisions of Section 24 of the Public Health Act, 1936.

In addition, 121 houses, served by single drains, were referred to the Surveyor as a result of written authorisation from the owners.

## CLOSET ACCOMMODATION

The number of houses in the district unconnected with the sewerage system at the end of the year amounted to 5, the majority of these houses are farmhouses, or cottages which are on isolated sites on the hillsides, or houses situated in such positions that connection with the nearest sewers is not possible.

The appended Table 8 , which is compiled from the reports submitted by the Public Health Inspectors, indicates the extent and character of the means of excrement disposal in the district at the end of 1968.

TABLE 8

No. of privies with fixed receptacles (middens, etc.)	37
No. of privies with movable receptacles .. ..	3
No. of water closets (freshwater, cistern flushed)	29,811
No. of water closets (waste water) .. ..	-
No. of water closets (hand flushed) .. ..	231

## PUBLIC CLEANSING

The scavenging of the whole district, with the exception of the portion of Gilfach Goch which is within the area, was undertaken by the Council by district labour under the supervision of Mr. E. T. T. Rees, the Borough Engineer and Surveyor.

## SANITARY INSPECTION OF THE AREA, 1968

The sanitary inspection of the area was carried out by nine public health inspectors under the direct supervision of the Chief Public Health Inspector, and the following Table is a summary of the information relating to the work done during the course of the year :-

TABLE 9

Infectious Disease Investigation..	..	..	..	..	79
Infectious Disease Revisits and Disinfections	..	..			25
House Inspection :-					
Re-Visits to Unabated Nuisances	..	..	..	..	1,693
re Housing Act	..	..	..	..	836
re Nuisances	..	..	..	..	1,214
No action necessary.	..	..	..	..	113
Work done without notice	..	..	..	..	17
Preliminary Notices issued	..	..	..	..	251
Statutory Notices served	..	..	..	..	201
Notices complied with - Preliminary	..	..	..	..	98
Notices complied with - Statutory..	..	..	..	..	334
Applications re Advances for House Purchase.	..	..			432
Rent Act Investigations	..	..	..	..	18
Improvement Grant Applications	..	..	..	..	930
Council House Applications	..	..	..	..	2
Interviews and Letters	..	..	..	..	3,175
Visits of Inspection to :-					
Shops re Food Hygiene Regulations..	..	..	..	..	62
Shops re Unsound Food, etc.	..	..	..	..	215
Dairies and Milkshops	..	..	..	..	5
Slaughterhouses	..	..	..	..	379
Bakehouses	..	..	..	..	1
Ice-Cream Vendors	..	..	..	..	-
Fried Fish Shops	..	..	..	..	3
Factories and Workshops..	..	..	..	..	99
Scavenging Depots	..	..	..	..	29
Back Lanes	..	..	..	..	50
Piggeries	..	..	..	..	-



Sewers, Drains and Culverts .. .. .	1,781
Common Lodging House .. .. .	-
Meat Destroyed .. .. .	742 lbs.
Meat offal destroyed .. .. .	30,855 lbs.
Other foods destroyed .. .. .	8,770 lbs.

There were 251 informal notices and 201 statutory notices served in the course of the year in respect of nuisances, housing defects and other contraventions of byelaws, and during the same period nuisances were abated or repairs affected in 17 instances without the service of notices, whilst 98 informal notices and 334 statutory notices were complied with. The local authority carried out work at 17 houses in default of owners served with statutory notices. These figures include the work shown in the table on housing statistics.

#### PREMISES AND OCCUPATIONS CONTROLLED BY BYELAWS, REGULATIONS OR ORDERS

The number of premises and occupations subject to control by byelaws, regulations or orders in the district was 84 as indicated in the following table. The table excludes dairies on farms which are now under the supervision of the Minister of Agriculture, Fisheries and Food :-

TABLE 10

Description	Total
Bakehouses .. ..	20
Dairies and Milk Shops	54
Common Lodging House	-
Slaughterhouses ..	2
Offensive Trades ..	8
	84

#### COMMON LODGING HOUSES

There are no common lodging-houses registered in the Borough.

# SHOPS

Table 11 gives certain details of Shops and employees for 1968:-

TABLE 11

Number of Shops in the District in 1967	..	..	..	..	..	..	1,569
New Shops established in 1968	..	..	..	..	..	..	29
Shops removed from the Register in 1968	..	..	..	..	..	..	44
Net decrease in Shops in 1968	..	..	..	..	..	..	15
Number of Shops in District in 1968	..	..	..	..	..	..	1,554
Number of Shops in which Assistants are employed	..	..	..	..	..	..	789
Number of Shops exempted from Weekly Half-Holiday Order	..	..	..	..	..	..	796
Number of Shops exempted from Weekly Half-Holiday Order and in which Assistants are employed	..	..	..	..	..	..	326
Number of Assistants in exempted Shops	..	..	..	..	..	..	566
Number of Shops and other premises or businesses in which Young Persons are employed other than as Shop Assistants	..	..	..	..	..	..	22
Number of Young Persons employed other than as Shop Assistants	..	..	..	..	..	..	87
Legal Proceedings taken under Shops Acts during 1968.	..	..	..	..	..	..	-

The detailed administration of the Shops Acts was continued by two shops inspectors who are also appointed as part-time Public Health Inspectors in accordance with the Public Health Officers Regulations, 1959. The Inspectors render occasional assistance in the general duties of the Public Health Inspector

The following summary provides information as to the main activities of the Inspectors during the year :-

Observation Duty - Number of hours	..	..	..	..	..	..	..	368
------------------------------------	----	----	----	----	----	----	----	-----

## Visits to Shops -

Food Hygiene Regulations	..	..	..	..	..	..	..	..	2,204
Re-Shops Act, 1950	..	..	..	..	..	..	..	..	1,386
Unsound Food	..	..	..	..	..	..	..	..	271
Other Visits	..	..	..	..	..	..	..	..	91

## Notices Issued :-

Re Food Hygiene Regulations	..	..	..	..	..	..	..	..	29
Re Shops Act	..	..	..	..	..	..	..	..	17

Sampling Action (Food and Drugs Act) No. of hours	..	..	..	..	..	..	672
Visits re Milk and Dairies Regulations.	..	..	..	..	..	..	104

There were no defects reported upon as having been discovered or remedied in shops during the year.

No applications were received by the Council during the year for certificates under Section 38(6) of the Shops Act, 1950, giving exemption from the obligation to provide and maintain suitable and sufficient sanitary conveniences for the use of persons employed in or about a shop.

The Shops Inspectors did not report any case during the year in respect of which it was necessary to institute legal proceedings for any infringement of the Shops Act, and the Closing Orders made thereunder.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963.

The following Table No.12 gives particulars of the premises registered with this Authority during the year which received a general inspection. The two Shops Inspectors carried out general inspections of 666 registered premises and also paid 2,501 visits of all kinds to registered premises.

TABLE 12

Class of Premises	Registered during year	Total Registered at end of year	General Inspection
Offices	-	131	129
Retail Shops	3	474	453
Wholesale Shops, warehouses	-	15	15
Catering establishments, canteens	-	71	69
Fuel storage depots	-	-	-
Totals	3	691	666

An analysis of persons employed in the registered premises by workplace during 1968 is shown in Table 13.

TABLE 13

Class of Workplace	Number of Persons Employed
Offices	949
Retail Shops	1,760
Wholesale departments, warehouses	124
Catering establishments	332
Canteens	7
Fuel storage depots	-
TOTAL	3,172
Total Males	1,300
Total Females	1,872

No Certificates of Grant of Exemption under Section 46 of the Act were issued during the year.

The Shops Inspectors did not report any case during the year in respect of which it was necessary to institute legal proceedings for any contravention of the provisions of the Act.

Accidents in Offices, Shops, etc.

During the year, ten accidents were reported and investigated as compared with 18 accidents in 1967. As in previous years, the majority of accidents in 1968 were due to carelessness on the part of the employees rather than any infringements of the requirements of the Act by the employers.

The following TABLE 14 gives particulars of the accidents, reported from 8 shops and 2 offices, during the year, -

TABLE 14

Cause of Accident	No. of Accidents		No. fatal	No. due to contraventions
	Males	Females		
Machinery	-	2	-	-
Hand tools	-	1	-	-
Desk Drawer	-	1	-	-
Handling goods	1	1	-	-
Falls of Persons	-	4	-	-
TOTALS	1	9	-	-



The appended table provides information regarding contraventions of the Act discovered by the two Shops Inspectors during 1968.

TABLE 15

Nature of Contravention	Offices	Shops	Wholesale Shops Etc.	Catering Establ.	Fuel Storage Depots	Totals
Temperature	-	-	-	-	--	-
First-aid requirements	1	-	-	-	-	1
Running hot water	2	-	-	-	-	2
Wash hand basins and sinks	-	-	-	-	-	-
Sanitary conveniences	1	-	-	-	-	1
Repairs to sanitary conveniences	-	-	-	-	-	-
Heating	-	-	-	-	-	-
Lighting	1	-	-	-	-	1
Ventilation	-	-	-	-	-	-
Handrails	1	-	-	-	-	1
Cleanliness	1	-	-	-	-	1
Provision of Abstract	2	-	-	-	-	2
Floors	-	-	-	-	-	-
Clothing accommodation	2	-	-	-	-	2
Totals	11	-	-	-	-	11

## IMPROVEMENT GRANT SCHEME

### 1. Voluntary Grants

The Council's Scheme of Improvement Grants has been in operation for thirteen years and during that time some 3412 grants have been paid.

During the past five years, grants have been paid as follows :-

1964	-	292
1965	-	269
1966	-	330
1967	-	284
1968	-	228

Of the 228 grants paid in 1968, the proportion of standard grants in relation to the more popular discretionary grant was in the ratio of 1 to 20; and the majority of the applications required the extension of kitchens or pantries to accommodate a bathroom and indoor water closet. This arrangement enabled the householder to conserve valuable living space.

### 2. Compulsory Improvement Grants

The Council have not yet exercised the powers for the compulsory improvement of tenanted dwellings to provide standard amenities under Part II of the Housing Act, 1964.

With the high degree of owner occupation in the Rhondda, the voluntary system of Improvement Grants is usually favoured.

## FACTORIES

The total number of premises in the district affected by the Factories Act, 1961 is 506 made up in Table 16.

TABLE 16

	Total	Without Mechanical Power	With Mechanical Power
Factories	444	97	347
Bakehouses	20	1	19
Building Operations	-	-	-
Electrical Stations	7	-	7
Outworkers	35	35	-
	506	133	373

The Public Health Inspectors paid 1 visit to a bakehouse and 99 visits to other premises embraced by the Act during the course of the year.

The appended tables provide information relating to the trades carried on at the premises to which the above-mentioned Act applies, the inspections made during the year and the results of action taken in connection therewith.



TABLE 17

1. Inspection for purposes of provisions as to health.

	Number of Premises	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(1) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authority	444	99	-	-
(2) Factories not included in (1) in which Section 7 is enforced by Local Authority	20	1	-	-
(3) Other premises in which Section 7 is enforced by Local Authority (excluding outworkers' premises)	-	-	-	-
Totals	464	100	-	-

TABLE 18

2. Defects found

	Number of defects			No. of defects in respect of which prosecutions were instituted
	Found	Remedied	Referred to H.M. Inspector	
Want of cleanliness (S1)	1	-	-	-
Overcrowding (S2)	-	-	-	-
Unreasonable temperature (S3)	-	-	-	-
Inadequate ventilation (S4)	-	-	-	-
Ineffective drainage of floors (S6)	-	-	-	-
Sanitary Conveniences (S7)				
(a) Insufficient	3	-	-	-
(b) Unsuitable or defective	1	-	-	-
(c) not separate for sexes	-	-	-	-
Other offences against the Act (Not including offences relating to outwork)	-	-	-	-
Totals	5	-	-	-

TABLE 19

3. Outwork

Nature of Work	Class	No. of Outworkers (August)	No. of instances of work in un-wholesome premises
Making wearing apparel	1	20	-
Making of boxes or other receptacles, etc.	21	15	-
Making of boxes or other receptacles, etc., and making or filling cosaques, Christmas crackers, etc.	21/29	-	-
Making of filling cosaques, Christmas crackers, etc.	29	-	-
Total		35	-

RAG FLOCK AND OTHER FILLING MATERIALS ACT, 1951

The above-mentioned Act repealed the Rag Flock Acts, 1911 and 1928, and is administered by the Borough Council as the Local Authority.

The premises of one upholstering and bedding firm and one clothing factory are registered under the Act.

No samples of filling materials were submitted for analysis during the year.

SWIMMING BATHS

The open-air swimming baths situated at Treherbert, Ystrad, Porth, and Ferndale and paddling pools at Ystrad and Porth, are administered by the Borough Surveyor's Department of the Council, each bath being under the control of a suitably qualified superintendent. These baths and paddling pools are invariably fully patronised during the summer bathing season and the water is subjected to constant filtration and chlorination, the efficiency of the chlorination being regularly checked by means of colourimetric tests. Samples of water from these baths and paddling pools were also submitted during the summer for bacteriological examinations at the Public Health Laboratory. Of the 26 samples submitted, 18 were found to be satisfactory.

#### ERADICATION OF BED BUGS

The disinfection of houses harbouring bed bugs or other insects was undertaken under the supervision of the District Public Health Inspectors, and 8 houses were treated in the district during the year, 2 being Council houses. The methods adopted included the use of D.D.T. Powder, spraying with zaldecide fluid containing D.D.T., together with the stripping of walls, removal of skirting boards, etc., and the fumigation of rooms with formaldehyde vapour when considered necessary.

#### RATS AND MICE DESTRUCTION

During the year three whole-time rodent operators were employed in carrying out investigations into the prevalence of rodent infestation and the necessary treatment of such infestations in premises in the district, and six operators were employed whole-time on the inspection and treatment of the sewers in the district, the whole staff of operators being under the direct supervision of the out-door rodent control supervisor.

Table gives information of the lines required by the Infestation Control Division of the Ministry of Agriculture, Fisheries and Food in respect of the prevalence of rats and mice; and the measure of control carried out by the rodent control staff of the local authority during the twelve months ended 31st December, 1968.

Of 27 Local Authority properties included in the Non-Agricultural properties in Table 20 include 2 refuse tips.

There are no large warehouses or wharfage in the area to create any special circumstances for the undue presence of rats and mice.

TABLE 20

PREVENTION OF DAMAGE BY PESTS ACT, 1949.

	TYPE OF PROPERTY		
	Non-Agricultural	Agricultural	Total
PROPERTIES OTHER THAN SEWERS			
1. Number of properties in Local Authority's District	35,662	22	35,684
2. (a) Total number of properties (including nearby premises) inspected following notification	1,104	-	1,104
(b) Number infested by :-			
(1) Rats	1,065	-	1,065
(11) Mice	39	-	39
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	-	22	22
(b) Number infested by :-			
(1) Rats	-	-	-
(11) Mice	-	-	-



There was no occasion during the year for disinfection work to be carried out in conjunction with rodent operators of adjoining districts.

4,140 poison baits

In the same period 16,257 token baits, and 4,065 post baits were laid and no traps were set.

Table 21 gives details of sewers treated.

TABLE 21

SEWERS

Ward	Total No. of Manholes Treated	Total No. of Manholes showing pre-bait takes.	Total No. of manholes showing com- plete pre- baits taken	Total No. of Poison baits laid.
Treherbert	855	100	86	100
Treorchy	657	82	66	82
Pentre	440	86	73	86
Ystrad	436	49	44	49
Llwynypia	877	101	84	101
Trealaw	799	82	63	82
Penygraig	1,289	129	105	129
Porth	1,912	216	177	216
Ynyshir	922	103	86	103
Tylorstown	1,040	139	115	134
Ferndale	1,201	163	136	163
Totals	10,428	1,245	1,035	1,245



## PUBLIC MORTUARIES

Two public mortuaries, situated in the cemetery grounds Trealaw and at Oakland Terrace, Ferndale, have been erected and maintained by the Council and were utilised during the year for the reception of 4 and 4 bodies, respectively.

Facilities are available in each of these mortuaries for carrying out post-mortem examination. No examinations were carried out during the year.

## SCRAP METAL DEALERS

The Scrap Metal Dealers Act, 1964, came into force on the 1st April, 1965, and from that date the principal provisions to the law relating to old metal dealers and Marine Store Dealers were repealed and replaced by new statutory provisions for the registration and control of scrap metal dealers. Section 2 of the Act relates to the registration by the Council of persons carrying on business as scrap metal dealers.

During the year, four persons were registered as Scrap metal dealers. At the end of 1968, there were fourteen persons registered as carrying on business as scrap metal dealers.

## LEGAL PROCEEDINGS

The appended summary gives details of the cases under the Public Health Act, 1936, in which the Department's activities led to proceedings at the local Courts of Justice in the course of the year.

Information relating to proceedings under the Public Health Act, 1936, is as follows :-

TABLE 22

### CASES OUTSTANDING 1967. :-

Nuisance Orders	10	Other Cases	13	Total .. .. .	23	
Cases commenced 1968	.. .. .	.. .. .	.. .. .	.. .. .	<u>21</u>	44
Work done after proceedings commenced	.. .. .	.. .. .	.. .. .	.. .. .	14	

(Standing adjourned - 18 adjourned sine die - 5 = 23)

(Nuisance Orders b/d - 10 obtained - 2 = 12)

CASES OUTSTANDING 1968 (Continued)

Work done after Nuisance Order obtained..	..	..	..	..	..	-
Withdrawn - Notices cancelled..	..	..	..	..	..	3
Withdrawn - Demolition Orders made..	..	..	..	..	..	2
Withdrawn - Closing Order made	..	..	..	..	..	1
Withdrawn - Change of Ownership	..	..	..	..	..	<u>1</u>
						<u>7</u>

CASES OUTSTANDING END OF 1968:

Nuisance Orders.	..	..	..	..	..	..	..	..	11
Other Cases	..	..	..	..	..	..	..	..	<u>12</u>
									<u>23</u>

RIDING ESTABLISHMENTS ACT, 1964

This Act regulating the keeping of Riding Establishments came into operation on the 1st April, 1965.

Under the provisions of Section 3 of the Act the Council authorised two firms of Veterinary Surgeons to carry out inspections of premises.

From the 1st April, 1968, the prescribed fee for a Riding Establishment Licence was increased from ten shillings to ten pounds under the provisions of the Miscellaneous Fees (Variation) Order, 1968.

No premises were licensed during the year.

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963.

The Animal Boarding Establishments Act, 1963, which came into operation on the 1st January, 1964, provides for a system of licensing and inspection by local authorities of any establishment at which a business of providing accommodation for cats or dogs is carried on.

No premises were licensed during the year.

NOISE ABATEMENT

The Public Health Act, 1936, as amended by the Noise Abatement Act, 1960, makes a nuisance from noise or vibration a Statutory Nuisance.

Complaints were received concerning noise or vibration from two industrial premises, noise from a betting shop and Club premises, barking of dogs and a nuisance from a loud record player at a private dwelling. As a result of advice from District Public Health Inspectors concerned and the co-operation of the owners or occupiers of the premises, the noise nuisances have often been abated or minimised.

S E C T I O N    I I I

HOUSING

The location of the new houses passed for occupation in 1968 is shown in Table 23.

TABLE 23

Table showing localities of new Houses  
passed for Occupation by Council

Street and Locality	Ward	Houses	Flats
Penpisgah Road, Penygraig	Penygraig	32	4
Graigddu Court, Dinas	Penygraig	-	67
Heol-y-Twyn, Wattstown	Ynyshir	8	16
Heol Pendyrus West, Penrhys	Tylorstown	66	22
Heol-y-Waun, Penrhys	Tylorstown	54	18
Pen Tyntyla, Penrhys	Tylorstown	16	6
Totals		176	133

Table 24 shows the position regarding the provision of houses by the Council since 1945 (information provided by the Housing Architect).

TABLE 24

	In course of erection 31.12.68.			Completed and occupied since 1945		
	Houses	Flats	Total	Houses	Flats	Total
Temporary (Bungalows)	-	-	-	112	-	112
Permanent						
(1) Traditional	592	359	951	2,396	876	3,272
(2) Non-Traditional (B.I.S.F. and New Traditional Houses	-	-	-	202	-	202
(3) Conversions	-	-	-	-	26	26
Requisitions of existing Properties	-	-	-	-	-	-
TOTALS	592	359	951	2,710	902	3,612

## 2. WORK CARRIED OUT BY PUBLIC HEALTH INSPECTORS

Consequent upon inspections carried out by the Public Health Inspectors, followed by interviews with the owners or the service of informal or statutory notices 432 houses were repaired or defects discovered therein were remedied, whilst 17 houses were similarly attended to by the local authority in default of the owners; making a total of 449 houses dealt with during the year; the corresponding number of houses similarly dealt with in the previous year was 319. As most of the houses in the district have been erected for a period of fifty years or more, their maintenance in a satisfactory state of fitness for human habitation has caused considerable concern to the Authority. Greater pressure has had to be made on house-owners to carry out repairs, and during the year particulars of statutory notices served in respect of 69 houses were forwarded to the Legal Department of the Council with a view of instituting legal proceedings.

The following summary gives details of the nuisances and defects remedied in the course of the year :-

TABLE 25

### 1. SLOP SINKS.

(a) Slop sinks repaired or renewed..	..	..	..	..	6
(b) Waste pipes repaired or renewed	..	..	..	..	5
(c) Slop sinks provided ..	..	..	..	..	2



TABLE 25 (cont.)

2. WATER CLOSETS

(a) Provisions of new w.c. .. .. .	1
(b) Rebuild w.c. .. .. .	1
(c) Walls, roofs, doors, floors, etc., repaired..	56
(d) Flushing appliances repaired or renewed ..	41
(e) Flushing appliances provided.. .. .	-
(f) Pans renewed or provided. .. .. .	18
(g) Ventilation provided .. .. .	-
(h) Water supply provided .. .. .	1
(i) Water service pipes repaired or renewed. ..	6

3. HOUSE

(a) External walls, woodwork, etc., repaired ..	159
(b) Internal walls, woodwork, floors, etc., repaired	141
(c) Dampness abated by removal of earth .. ..	-
(d) Bedrooms ventilated .. .. .	-
(e) Windows made openable .. .. .	-
(f) Window area increased .. .. .	-
(g) Pantry or food safe provided .. .. .	-
(h) Sufficient light in pantry provided .. ..	-
(i) Water supply pipes and fittings repaired etc.	-
(j) Light of basement stairs provided.. .. .	-

4. DRAINS

(a) Lip trap removed .. .. .	-
(b) Cement well around gully trap .. .. .	-
(c) Grid or cover to gully trap .. .. .	2
(d) Renew gully trap .. .. .	3
(e) Ventilating shaft repaired or extended ..	-
(f) Drain ventilated .. .. .	-
(g) Water Closet drain unblocked.. .. .	1
(h) Slop water drain unblocked .. .. .	-
(i) Water closet drain repaired .. .. .	9
(j) Slop water drain repaired .. .. .	3
(k) Water closet and slop water drain unblocked	-
(l) Drainage of subsoil water made good .. ..	2
(m) Inspection chamber provided .. .. .	1
(n) Inspection chamber repaired or renewed ..	-

5. AREA

(a) Repaired	..	..	..	..	..	..	..	18
(b) Repaired and extended	..	..	..	..	..	..	..	-
(c) Steps repaired or renewed	..	..	..	..	..	..	..	15
(d) Division walls repaired or renewed	..	..	..	..	..	..	..	2
(e) Boundary walls repaired or renewed	..	..	..	..	..	..	..	15
(f) Retaining walls repaired or renewed	..	..	..	..	..	..	..	18
(g) Back lane door and frame repaired or renewed	..	..	..	..	..	..	..	7
6. Shoots and downpipes repaired or fixed anew	..	..	..	..	..	..	..	80
7. Dilapidated structures repaired or fixed anew	..	..	..	..	..	..	..	-
8. Structures obstructing light/ventilation of living rooms removed/repared	..	..	..	..	..	..	..	-
9. Dampness abated	..	..	..	..	..	..	..	126
10. Dirty house cleaned	..	..	..	..	..	..	..	-
11. Overcrowding	..	..	..	..	..	..	..	-
12. Animals removed	..	..	..	..	..	..	..	-
13. Fowls removed	..	..	..	..	..	..	..	-
14. Bug infestation	..	..	..	..	..	..	..	-
15. Manure :-								
(a) removed	..	..	..	..	..	..	..	1
(b) receptacle provided	..	..	..	..	..	..	..	-
16. Accumulation of refuse removed	..	..	..	..	..	..	..	6
17. Coals in house or on paving removed	..	..	..	..	..	..	..	-

TABLE 26

HOUSING STATISTICS, 1968.

1. Inspection of Dwelling-houses during the year :-

(1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts)	506
(b) Number of inspections made for the purpose.. ..	506
(2) (a) Number of dwelling houses (including under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932. ..	125
(b) Number of inspections made for the purpose .. ..	125
(3) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .	118
(4) Number of dwelling houses (exclusive of those referred to under the preceeding sub-head) found not to be in all respects reasonably fit for human habitation .. ..	275

2. Remedy of Defects during the Year without service of formal Notices :-

Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers .. .. .	115
---	-----

3. Action under Statutory Powers during the year :-

(a) Proceedings under Sections 9, 10 and 12 of the Housing Act, 1957 :- .. .. .	
(1) Number of dwelling houses in respect of which notices were served requiring repairs (Section 9)	-
(2) Number of dwelling houses which were rendered fit after service of formal notices :	
(a) By owners.. .. .	-
(b) By Local Authority in default of owners (Section 9) .. ..	-
(b) Proceedings under the Public Health Acts :	
(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied ..	251

(2) Number of dwelling houses in which defects were remedied after service of formal notices :-

(a) By owners.. .. .	317
(b) By Local Authority in default of owners.. ..	17

(c) Proceedings under Sections 17 and 23 of the Housing Act, 1957 :-

(1) Number of dwelling houses in respect of which Demolition Orders were made.. .. .	46
(2) Number of dwelling houses demolished in pursuance of Demolition Orders.. .. .	30
(3) Unfit houses in respect of which Demolition Orders were revoked .. .. .	1

(d) Proceedings under Sections 17 and 18 of the Housing Act, 1957 :-

(1) Number of unfit houses in respect of which Closing Orders were made .. .. .	49
(2) Parts of buildings in respect of which Closing Orders were made .. .. .	23
(3) Unfit houses in respect of which Closing Orders were determined .. .. .	3
(4) Parts of buildings in respect of which Closing Orders were determined .. .. .	1

RENT ACT, 1957

Since the coming into operation of the above Act, many applications for Certificates of Disrepair have been investigated and the position as at 31st December, 1968, is shown in Table 27.

TABLE 27

Part I - Application for Certificate of Disrepair	6.7.57 to 31.12.62	1963	1964	1965	1966	1967	1968
1. No. of applications for certificates	717	26	14	19	15	20	7
2. Decisions not to issue certificates	2	1	-	-	1	1	-
2a No. of applications cancelled	22	-	-	-	-	-	-
2B No. of applications pending	54	7	6	10	13	13	8
3. No. of decisions to issue certificates							
(a) in respect of some but not all defects	210	9	5	2	4	3	3
(b) in respect of all defects.. ..	476	14	8	12	10	11	7
4. No. of undertakings given by land- lords under paragraph 5 of the First Schedule .. .. .	214	3	4	2	2	1	2
5. No. of undertakings refused by Local Authority under proviso to paragraph 5 of the First Schedule.. .. .	9	-	-	-	-	-	-
6. No. of Certificates issued .. .. .	478	20	12	10	12	11	12
6a No. of Certificates issued as to the remedying of defects specified in a landlord's undertaking to remedy defects .. .. .							
(a) Tenant .. .. .	100	1	-	-	-	-	1
(b) Landlord .. .. .	60	6	3	-	-	1	-
<hr/>							
Part II - Applications for Cancellation of Certificates							
<hr/>							
7. Applications by landlords to Local Authority for cancellation of Certificates .. .. .	178	6	9	5	3	6	4
8. Objections by tenants to cancellation of certificates .. .. .	110	5	4	2	1	1	-
9. Decisions by Local Authority to cancel in spite of tenants' objection	20	-	1	2	-	-	-
10 Certificates cancelled by Local Authority .. .. .	124	5	5	5	4	4	1



SLUM CLEARANCE

During the year the undermentioned areas had been declared and the families rehoused, viz :-

TABLE 28

	<u>Families</u>	<u>Total</u>
Nos. 1 to 32 Bush Houses, Blaenclydach	34	
Nos. 33 to 50 Bush Houses, Blaenclydach	20	54
Families rehoused from INDIVIDUAL UNFIT Houses		<u>65</u>
		<u>119</u>

S E C T I O N    I V

INSPECTION AND SUPERVISION OF FOOD

MILK

The number of persons carrying on businesses concerned with the production and distribution of milk in the district during 1968 were as follows :-

Dairy Farmers	1
Purveyors of Milk and	
Milk-Shop Keepers	54

The estimated quantity of milk produced by the dairy farmer daily amounted to 8 gallons, all of which was sold wholesale to a pasteurising establishment.

The estimated quantity of liquid milk sold daily in the district during the year amounted to 6,034 gallons, equivalent to a daily consumption of 0.5 pint per head of the estimated population; the corresponding consumption per head in the previous year was 0.48.

There were 57 premises in the area directly concerned with the distribution of milk, and the number of visits made by the Public Health Inspectors to these premises during the year amounted to 5. Nearly all the milk distributed in the district was supplied in bottles which had been filled on the wholesalers' premises where the milk had been pasteurised and, consequently, most of the premises occupied by the distributors of milk were only used for the temporary storage of the bottled milk during the intervals between the reception of the milk by the retailers and the retail distribution thereof to the consumers' houses.

The number of samples of milk sold as "pasteurised" submitted to bacteriological examination during the year was 62, all of which gave satisfactory results on the application of the Phosphatase Test, indicating that the milk had been adequately heat treated.

The milk which had been treated at the two licensed pasteurising establishments in the district was also regularly sampled and 29 samples of treated milk of the "pasteurised" designation were taken during the year: all of which gave satisfactory results on the application of the Phosphatase Test.

During the year no samples of untreated milk produced on farms in the district were examined for the presence of tubercle bacilli.

Milk Supplied - Brucella Abortus

Neither of the Two Milk Distributors registered in the Borough to produce and retail milk were licenced for the sale of untreated milk. No raw milk was sold during the year and no samples of this type of milk were taken.

Milk (Special Designations) Regulations

At the end of the year the appropriate operative licences to use special designations in relation to milk were as follows :-

TABLE 29

"Pasteurised Milk":

Pasteurisers..	..	..	..	..	..	..	2
Dealers..	..	..	..	..	..	..	52

"Sterilised Milk":

Dealers..	..	..	..	..	..	..	48
-----------	----	----	----	----	----	----	----

"Ultra Heat Treated Milk":

Dealers..	..	..	..	..	..	..	4
-----------	----	----	----	----	----	----	---

ICE-CREAM

During the year, the Public Health Inspectors continued to devote considerable attention to premises wherein ice-cream was manufactured, stored or sold, in order to secure compliance by all vendors of ice-cream with the provisions of the Food and Drugs Act, 1955, and the Ice-cream (Heat Treatment etc.) Regulations, 1959.

At the end of the year 53 premises had been registered as suitable for the manufacture, storage and sale of ice-cream, 1 premises for the manufacture, storage and sale of ice-lollies and 432 premises for the storage and sale of ice-cream; in the latter group of premises there were included 388 shops where ice-cream in the pre-packet state, as delivered by wholesale manufacturers, were stored and sold by retail.

Prior to registration, all the premises were inspected and inquiries made concerning the health of the vendors, particularly in relation to the history of enteric or intestinal infections.

During the year 49 samples of ice-cream sold in the district were submitted for examination by the Methylene Blue Test and provisional grading 33 or 67.35 per cent. were reported as being in Grade 1 or "Satisfactory", 11 or 22.45 per cent were in Grade 2 or "fair", 2 or 4.08 per cent. were in Grade 3 or "unsatisfactory", and 3 or 6.12 per cent. in Grade 4 or "very unsatisfactory".

The manufacturers of the "unsatisfactory" and "very unsatisfactory" samples were informed of these results and were advised to give the matter their attention, especially in regard to personal cleanliness and appropriate cleansing and sterilisation of the utensils. Amongst the 46 samples taken in the previous year, the percentages classified in Grades 1 to 4 were 52.18, 8.69, 15.22 and 23.91.

# MEAT

The number of slaughterhouses licensed in the district during 1968 was 2, and all the slaughtering was carried out at the two slaughterhouses situated at Howard Street, Treorchy and Llanfoist Street, Ton Pentre. During the year, meat inspection was undertaken by one permanent meat inspector, holding the Certificate in Meat Inspection; who was occasionally relieved by a Public Health Inspector, holding the Meat Inspectors' certificate.

The quantities of meat and offal surrendered and condemned owing to the presence of diseased conditions, etc., were 742 lbs. and 30,855 lbs., respectively, the amounts attributable to tuberculosis being 240 lbs. and 127 lbs., respectively.

The following table gives a summary of the results of the inspection of the carcasses of animals slaughtered in the district during the year.

TABLE 30

Carcasses Inspected and condemned during the  
Year 1968.

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	2,446	648	97	15,452	7,722
Number Inspected	2,446	648	97	15,452	7,722
ALL DISEASES EXCEPT					
Tuberculosis :-					
Whole carcasses condemned	12	10	-	99	17
Carcasses of which some part or organ was condemned	1,109	537	3	2,587	693
Percentage of the number inspected affected with disease other than Tuberculosis	45.84	84.41	3.09	17.38	9.19
Tuberculosis ONLY :-					
Whole carcasses condemned	-	-	-	-	-
Carcasses of which some part or organ was condemned	-	-	-	-	46
Percentage of number inspected affected with Tuberculosis	-	-	-	-	0.59

The total number of carcasses inspected in 1968 was 26,365 compared with 22,751 carcasses inspected in the previous year.



The following table shows the percentage of animals which are affected with tuberculosis amongst those slaughtered in the district in each year since 1958 :-

TABLE 31

Percentage of the number of carcasses inspected  
affected with Tuberculosis

Year	Cattle excluding Cows	Cows	Calves	Pigs
1958	1.44	4.50	-	1.68
1959	0.69	0.78	-	1.37
1960	0.99	0.61	-	0.59
1961	0.04	0.89	-	0.74
1962	0.08	-	-	0.39
1963	-	0.26	-	0.78
1964	0.10	1.48	-	0.00
1965	0.11	1.81	-	1.08
1966	0.05	0.30	-	2.35
1967	0.04	0.55	-	1.18
1968	-	-	-	-

OTHER FOODS

There were 20 bakehouses in the district which, with few exceptions, were of a small size. There were no underground bakehouses as defined in the Factories Act, 1937. The Public Health Inspectors made 1 visit to a bakehouse during the year.

A large bacon curing and "cooked-meats" factory was kept under regular supervision by the Public Health Inspector concerned.

POULTRY PROCESSING

There are no poultry processing establishments in the Borough.



UN SOUND FOOD

The principal articles of food condemned during the course of the year, apart from meat in slaughterhouses, were as follows :-

TABLE 32

<u>Food</u>	<u>lbs.</u>
Tinned Fruit .. .. .	1,342
Tinned Fruit Juice .. .. .	22
Tinned Meat .. .. .	2,398
Tinned Milk .. .. .	113
Tinned Cream .. .. .	22
Tinned Vegetables .. .. .	1,842
Tinned Fish .. .. .	108
Tinned Soups .. .. .	37
Fresh Meat .. .. .	759
Fresh Fruit .. .. .	32
Sugar .. .. .	11
Jam .. .. .	101
Butter .. .. .	58
Frozen Foods .. .. .	639
Sauce .. .. .	4
Puddings .. .. .	28
Flour .. .. .	83
Sponge Mix .. .. .	234
Trifle .. .. .	8
Rice .. .. .	3
Poultry .. .. .	126
Cheese .. .. .	127
Potatoes .. .. .	565
Eggs .. .. .	96
Coffee .. .. .	12

FOOD AND DRUGS ACT.

The examination of samples of food or drugs taken under the provisions of the Food and Drugs Act was undertaken during the year by Mr. L. E. Coles, B.Pharm., Ph.D., F.P.S., F.R.I.C., at the Cardiff and County Public Health Laboratory.

The total number of samples submitted during the year amounted to 286 consisting of 18 formal samples and 258 informal samples, the details of which are given in the appended summary.

TABLE 33

Summary of Samples submitted to the Public Analyst during 1968.

Description	Formal Samples			Informal Samples		
	No. Sub- mitted	Results		No. Sub- mitted	Results	
		Gen- uine	Not Gen- uine		Gen- uine	Not Gen- uine
Milk	27	15	12	95	94	1
Condensed Milk	-	-	-	3	3	-
Butter	-	-	-	5	5	-
Cream	-	-	-	1	1	-
Ice-Cream	-	-	-	5	5	-
Cake and Sponge Mixture	-	-	-	8	8	-
Drugs and Medicinal Preparations	-	-	-	8	8	-
Tinned Fruit	-	-	-	6	6	-
Dried Fruit	-	-	-	9	8	1
Stuffing Mix	-	-	-	1	1	-
Coconut desiccated	-	-	-	3	3	-
Cornflour etc.	-	-	-	8	8	-
Spices	-	-	-	2	2	-
Tinned Meat	-	-	-	12	12	-
Tinned Vegetables	-	-	-	4	4	-
Tinned Fish	-	-	-	2	2	-
Vegetables	-	-	-	1	1	-
Dehydrated Potatoes	-	-	-	1	1	-
Pie Filling	-	-	-	2	2	-
Sugar	-	-	-	2	2	-
Jellies, etc.	-	-	-	8	8	-
Flavouring	-	-	-	2	2	-
Honey and substitutes	-	-	-	2	2	-
Jam	-	-	-	3	3	-
Marzipan, Almond	-	-	-	1	1	-
Soft Drinks	-	-	-	6	5	1
Tea, Iced Lemon Mix	-	-	-	1	1	-
Tea	-	-	-	2	2	-
Sauces	-	-	-	2	2	-
Meat and Fish Pastes	-	-	-	3	3	-
Cheese Spread	-	-	-	1	1	-
Cabbage, pickled	-	-	-	1	1	-
Pepper	-	-	-	1	1	-
Gateau	-	-	-	2	-	2
Rice	-	-	-	3	3	-
Fat	-	-	-	1	1	-
Vinegar, malt	-	-	-	5	5	-
Sausages, Beef	-	-	-	16	16	-
Sausages, Pork	-	-	-	8	8	-
Meat Pies	-	-	-	9	9	-
Beefsteak and Kidney pie	-	-	-	1	-	1
Pasties	1	1	-	2	1	1
TOTALS	28	16	12	258	251	7

The Certificates of the Public Analyst disclosed that seven of the informal samples submitted to him during the year were not genuine, being samples of pasteurised milk; orange drink; pasties; beefsteak and kidney pie, gateau and currants.

Twelve formal samples of milk were certified as not genuine representing 42.86 per cent of the total number of formal samples taken during the year.

The following table contains details of the samples reported on by the Public Analyst as not genuine and the action taken by the Authority.

TABLE 34

Serial No.	Article	Nature of Adulteration or Irregularity	Action taken by the Authority
<u>INFORMAL SAMPLES</u>			
54S	Pasteurised Milk	Sample was deficient in non-fatty solids to the extent of not less than one (1) per cent and contained added water to the extent of not less than $\frac{1}{2}$ per cent.	In view of the low percentage of added water contained in the sample, no action was taken
196S	Orange drink	Labelling irregularity in that the sample contained not more than 30 mg of Vitamin C per ounce whereas the label stated the sample to contain 40 mg per ounce.	Importing firm notified and arranged for all packets of product to be withdrawn throughout the country.
202S	Pasties	Sample had an average meat content of not more than eight (8) per cent (calculated as raw beef on the whole pasty). The Meat, Pie and Sausage Roll Regulations, 1967, require that a meat pie containing meat and vegetable (pasty) shall have a meat content of not less than $12\frac{1}{2}$ per cent.	Followed up by formal sample which was certified as genuine.
210S	Beefsteak and Kidney Pie	Sample had an average meat content of not more than 1.2 ounces. The Meat Pie and Sausage Roll Regulations, 1967, require that a meat pie not exceeding 7 ounces (198.2 grammes) shall have a meat content of not less than 1.5 ounces (42.5 grammes).	Chief Public Health Inspector interviewed manufacturers who promised to improve quality of product.



Serial No.	Article	Nature of Adulteration or Irregularity	Action taken by the Authority
227S	Gateau	Two of the pieces had on each an extensive area of green mould growth of the species of aspergillus.	No further action taken
228S	Gateau	One of the portions had an area of mould growth of the species of Aspergillus.	Case referred to Town Clerk for legal action.
232S	Currants	Sample showed evidence of fermentation.	No further action taken.
<u>FORMAL SAMPLES</u>			
S1	Milk	Sample was deficient in non-fatty solids to the extent of not less than five (5) per cent and contained added water to the extent of not less than 5 per cent.	Samples Nos. S1 to S10 obtained from one producer. Legal action taken against producer in regard to nine charges of watering milk. Fined £5 in each case and ordered to pay 10 guineas Advocates' Fee and £30 Analyst's Fees. Cowman was fined £2 on 9 offences.
S2	Milk	Sample was deficient in non-fatty solids to the extent of not less than ten (10) per cent and contained added water to the extent of not less than 8 per cent.	
S3	Milk	Sample was deficient in non-fatty solids to the extent of not less than 0.5 per cent and contained added water to the extent of not less than 1 per cent.	
S4	Milk	Sample deficient in non-fatty solids to the extent of not less than eight (8) per cent and contained added water to the extent of not less than 8 per cent.	
S5	Milk	Sample was deficient in non-fatty solids to the extent of not less than six (6) per cent and contained added water to the extent of not less than 5 per cent.	
S6	Milk	Sample was deficient in non-fatty solids to the extent of not less than eight (8) per cent and contained added water to the extent of not less than 7 per cent.	

Serial No.	Article	Nature of Adulteration or Irregularity	Action taken by the Authority
S7	Milk	Sample was deficient in non-fatty solids to the extent of not less than 10 per cent and contained added water to the extent of not less than 5 per cent.	
S8	Milk	Sample was deficient in non-fatty solids to the extent of not less than 8 per cent and contained added water to the extent of not less than 7 per cent.	
S9	Milk	Sample was deficient in non-fatty solids to the extent of not less than ten (10) per cent and contained added water to the extent of not less than 6 per cent.	
S10	Milk	Sample was deficient in non-fatty solids to the extent of not less than ten (10) per cent and contained added water to the extent of not less than 7 per cent.	
S21	Milk	Sample was deficient in non-fatty solids to the extent of not less than eleven (11) per cent and contained added water to the extent of not less than 2 per cent.	Warning letter sent by Town Clerk to Producer.
S23	Milk	Sample was deficient in non-fatty solids to the extent of not less than eleven (11) per cent and contained added water to the extent of not less than 3 per cent.	Warning letter sent by Town Clerk to producer.



CONTROL OF FOOD AND FOOD PREMISES

(1) Food Hygiene (General) Regulations, 1960.

The premises in the borough from which food is sold, are classified into the following main categories.

TABLE 36

Type of business	Total	Number complying with Reg. 16.	Number to which Reg. 19 applies	Number complying with Reg. 19.
Butchers and Meat Purveyors	99	99	99	99
Confectioners, Bread and cake Dealers	27	27	-	-
Dairy Produce and Milk Shops	5	5	-	-
Fried Fish and Potato Shops	47	47	47	47
Greengrocers and Fruiterers	100	100	-	-
Grocers and Provision Delaers	180	180	19	19
Refreshment Houses and Temperance Bars	37	37	37	37
Restaurants and Cooked Meat Shops	13	12	12	12
Sweet Shops etc.	263	263	-	-
Bakehouses	20	12	20	20

(2) Premises registered under Section 16 of the Food and Drugs Act, 1955, and as dairies under the Milk and Dairies (General) Regulations, 1959 :-

Manufacture, storage and sale of ice-cream	53
Manufacture, storage and sale of ice-lollies	1
Storage and sale of ice-cream	432
Preparation and manufacture of sausages, potted meat, pickled or preserved foods	41
Preparation of Fried Fish and Potatoes	34
Dairies	57

(3) Number of inspections of registered food premises :-

-

Ice-cream Vendors

-

Fried Fish Shops

3

Dairies and Milk Shops

5

(4) During their visits to and inspections of food premises, the Public Health Inspectors have concentrated on the individual instruction of the food handlers in these premises on matters relating particularly to personal hygiene. Posters dealing with the handling of food have also been distributed periodically in these shops.

(5) In regard to the disposal of condemned food, the tinned foods have been dealt with by incineration in the refuse destructor, whilst cereal or starchy products such as sponge mixtures, etc., infested with mites have, on certain occasions, been disposed of to local pig keepers. Offal and condemned meat have been removed regularly from the local slaughterhouses by a contractor who owns premises, situated outside the district where the materials are processed and converted into fertilisers, etc.

(6) No special examination of stock or consignment of food was carried out in the district during the year.

The Liquid Egg (Pasteurisation) Regulations, 1963.

The regulations, which came into operation on the 1st January, 1964, require the pasteurisation of liquid egg to be used in food intended for human consumption.

There are no egg pasteurising plants in the Borough. No sample of liquid egg was submitted for examination in 1968.

Pesticide residues in foodstuffs.

No request were received during the year from the County Public Health Laboratory for the submission of samples of various kinds for examination in connection with the National Pesticide Residues Analysis Scheme.



SECTION V

NOTIFIED INCIDENCE OF  
CERTAIN INFECTIOUS DISEASES

The following diseases were notified as having occurred during the year :-

<u>Disease</u>	<u>No. of uncorrected notifications</u>
Erysipelas .. .. .	1
Scarlet Fever.. .. .	23
Enteric or Typhoid Fever. .. .	-
Paratyphoid Fever .. .. .	-
Acute Poliomyelitis .. .. .	-
Meningococcal Infection.. .. .	2
Acute Primary Pneumonia .. .. .	12
Acute Influenzal Pneumonia .. .. .	9
Dysentery .. .. .	2
Measles .. .. .	635
Whooping Cough .. .. .	69
Puerperal Pyrexia .. .. .	1
Ophthalmia Neonatorum .. .. .	3
Food Poisoning .. .. .	-
Respiratory Tuberculosis. .. .. .	25
Other forms of Tuberculosis .. .. .	1
Smallpox.. .. .	-

Table 36 shows further details of these cases.



TABLE 36 RHONDDA BOROUGH COUNCIL CASES OF INFECTIOUS DISEASES NOTIFIED DURING 1968.

NOTIFIABLE DISEASES	All Ages	Cases notified in the whole district										Total Cases notified in each Ward										Total cases admitted to Hospital		
		All Ages - Years										Unknown	Treherbert	Treorchy	Penitre	Ystrad	Llwynypïa	Trealaw	Penygraig	Porth	Ynysht		Tylorstown	Ferndale
		Under 1	1 yr	2 yrs	3 yrs	4 yrs	5 to 9	10 to 14	15 to 24	25 and over														
		Scarlet Fever	23	-	1	1	6	7	5	2	-													
Whooping Cough	69	8	5	8	10	13	21	2	1	1	-	-	-	-	11	10	4	2	-	-	24	16	-	
Acute Poliomyelitis (Paralytic)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Acute Poliomyelitis (Non Paralytic)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Measles	635	50	77	84	104	116	187	15	-	-	2	13	17	4	4	163	69	111	206	7	24	17	1	
Infective Hepatitis	89	-	-	1	4	9	26	25	15	8	1	2	11	12	2	13	3	5	3	5	20	35	-	
Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Dysentery	2	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-	-	2	-	-	-	-	-	
Meningococcal Infection	2	-	-	-	-	-	2	-	-	-	-	-	-	-	-	1	-	1	-	-	-	-	2	
Ophthalmia Neonatorum	3	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	
TOTALS	823	61	83	95	119	144	243	47	18	10	3	16	19	5	9	192	88	130	213	12	69	70	3	



TABLE 36

RHONDDA BOROUGH COUNCIL

CASES OF INFECTIOUS DISEASES NOTIFIED DURING 1968

NOTIFIABLE DISEASES	All Ages	Cases notified in the whole district					Total Cases notified in each Ward										Total Cases Admitted to Hospital		
		Under 5	All Ages - Years				Unknown	Treherbert	Treorchy	Pentre	Ystrad	Llwynypïa	Trealaw	Penygraig	Porth	Ynyshir		Tylorstown	Ferndale
Acute Pneumonia, Primary	12	7	1	2	1	1	-	-	-	-	1	6	2	1	2	-	-	-	3
Acute Penunonia, Influenzal	9	-	-	2	4	3	-	-	-	-	-	8	-	1	-	-	-	-	2
Smallpox	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Encephalitis, Infective	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Acute Encephalitis, Post Infectious	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Enteric or Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid Fevers	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	1	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
Food Poisoning	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	1	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-
Tuberculosis, Respiratory	25	-	-	6	9	10	-	1	3	4	1	-	-	2	2	1	6	5	1
Tuberculosis, Other	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tuberculosis, Meninges & C.N.S.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TOTALS	49	7	1	12	15	14	-	1	3	4	2	14	3	5	4	1	6	6	6

SECTION VI

TUBERCULOSIS

Table 37 shows the distribution by age-group and sex of new notifications and deaths from Tuberculosis during 1968.

TABLE 37

Age Group	RESPIRATORY				MENINGES AND C.N.S.				OTHER			
	Males		Females		Males		Females		Males		Females	
	No. of Cases Notified	No. of Deaths	No. of Cases Notified	No. of Deaths	No. of Cases Notified	No. of Deaths	No. of Cases Notified	No. of Deaths	No. of Cases Notified	No. of Deaths	No. of Cases Notified	No. of Deaths
00-	-	-	-	-	-	-	-	-	-	-	-	-
5	-	-	-	-	-	-	-	-	-	-	-	-
15	2	-	1	-	-	-	-	-	-	-	-	-
25-	2	-	1	1	-	-	-	-	-	-	-	-
45-	6	7	3	-	-	-	-	-	-	-	1	1
65-	8	6	2	1	-	-	-	-	-	-	-	-
All Ages	18	13	7	2	-	-	-	-	-	-	1	1

S E C T I O N    V I I

SERVICES FOR THE AGED

No further Day Centres were opened during the period under review; however, building works are progressing steadily in connection with the erection of a small new purpose-built Day Centre at Stanleytown and it is anticipated that this Centre will be opened in May or June of next year.

The Council's three established Day Centres - Nazareth, Williamstown; 'Combine' House, Tonypandy and "Teify House", Maerdy - were well attended throughout the year by the Centre Members and functioned satisfactorily.

For more efficient operational purposes, it was decided to amalgamate both the Penuel and Nazareth Kitchens at Nazareth; the amalgamation took place in March of this year.

Following the amalgamation of the two Kitchens, the woodworking machinery, tools, etc., housed at the Nazareth Centre, were transferred to Penuel.

Statistics regarding meals provided under the Services during the year are set out in the following tables.

TABLE 38

MEALS ON WHEELS SERVICE

MONTH	PENUEL KITCHEN	NAZARETH KITCHEN	TOTALS
JANUARY	4167	3101	7268
FEBRUARY	3292	2606	5898
MARCH	-	6114	6114
APRIL	-	6963	6963
MAY	-	6003	6003
JUNE	-	5733	5733
JULY	-	7549	7549
AUGUST	-	5808	5808
SEPTEMBER	-	5674	5674
OCTOBER	-	7820	7820
NOVEMBER	-	6700	6700
DECEMBER	-	5796	5796
TOTALS	7459	69867	77326

TABLE 39

MEALS PROVIDED AT NAZARETH CENTRE

MONTH	DINNERS	TEAS	SNACKS
JANUARY	975	1084	766
FEBRUARY	838	1080	696
MARCH	823	980	619
APRIL	915	1013	715
MAY	781	810	542
JUNE	689	676	472
JULY	939	940	589
AUGUST	774	762	434
SEPTEMBER	734	646	425
OCTOBER	994	926	596
NOVEMBER	781	825	515
DECEMBER	756	614	467
TOTALS	9999	10356	6836



MEALS PROVIDED AT COMBINE HOUSE

MONTH	DINNERS	TEAS	SNACKS
JANUARY	1299	986	628
FEBRUARY	1150	1080	536
MARCH	1177	1010	572
APRIL	1361	1214	567
MAY	1232	926	421
JUNE	1274	1025	497
JULY	1551	1241	673
AUGUST	1223	1243	660
SEPTEMBER	1185	921	509
OCTOBER	1865	1406	724
NOVEMBER	1476	1134	555
DECEMBER	1235	926	505
TOTALS	16028	12902	6847

TABLE 41

MEALS PROVIDED AT TEIFY HOUSE

MONTH	DINNERS	TEAS	SNACKS
JANUARY	1452	522	602
FEBRUARY	1209	614	544
MARCH	1048	496	383
APRIL	1115	478	321
MAY	911	497	254
JUNE	863	421	266
JULY	1053	542	348
AUGUST	952	365	281
SEPTEMBER	895	525	354
OCTOBER	1282	652	512
NOVEMBER	1038	576	412
DECEMBER	909	345	364
TOTAL	12727	6,033	4,641



## S E C T I O N     V I I I

### MISCELLANEOUS

#### LABORATORY    FACILITIES

The bacteriological and chemical examination of materials such as throat or nasal swabs, stools, water, ice-cream, milk, etc., submitted by the Health Department were undertaken at the Public Health Laboratory, Institute of Preventive Medicine, Cardiff, and any advice sought in relation to the collection of samples during the course of investigation was always readily obtained from the staff at the Laboratory.

#### HOSPITAL    FACILITIES

The local hospital facilities available for the inhabitants of the district are administered by the Pontypridd and Rhondda Hospital Management Committee on behalf of the Welsh Regional Hospital Board. The Committee control twelve hospitals, with a bed complement of 1,144.

#### NATIONAL ASSISTANCE ACT, 1948 - SECTION 47.

The above Section of the National Assistance Act, 1948, as amended by the National Assistance (Amendment) Act, 1951, provides for the removal to suitable institutions of persons who are considered to be in need of care and attention. No action was taken under this Section in 1968.





PERSONAL HEALTH SERVICES

The personal health services which are administered by the Rhondda Borough Council under the Scheme of Delegation agreed with the Glamorgan County Council are :-

National Health  
Service Act, 1946

Section 21	Health Centres
22	Care of Mothers and Young children.
23	Midwifery
24	Health Visiting
25	Home Nursing
26	Vaccination and Immunisation
29	Home Help Service
28	Prevention of Illness, Care and Aftercare

Section 28 (As amended by Mental Health Act, 1959)	Care and Aftercare of Mentally Ill in Residential Accommodation.
--	--

Mental Health Act, 1959, (County Council Functions)	Mental Health Services
--	------------------------

Nursery and Child Minders Regulations Act, 1948 (as amended by the Health Services and Public Health Act, 1968).	Registration and Inspection of Premises where Children are looked after for Gain.
--	---

# ANTE-NATAL CARE

The care of women during childbirth has been described as a measure of its degree of civilisation of a community. With every advance, scientific or sociological, the hazards of childbirth are being further reduced. However, it is ignorance about the coming event that causes so much worrying "Will I have a normal confinement? Will my baby be alright?" These are two of the most usual questions that go round and round in a woman's mind. Pregnancy is a condition that calls for highly responsible behaviour on the part of the expectant mother. She is an important member of the team which may include specialist, general practitioner, midwife and medical officer of health. The rest of the team can do little if the mother does not play her part and of importance in this respect is regular attendance at an ante-natal clinic.

The better the quality of ante-natal care and the earlier it begins in pregnancy, the safer is the outcome. The death rate among the babies of mothers who receive no care at all in pregnancy is about five times the average which means that about 1 in 7 of these babies is lost. This shows how great a difference proper care in pregnancy can make. However, even the babies who survive may be handicapped all their lives because their mothers did not receive proper care or did not know how to look after themselves.

TABLE 42

	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>
No. of centres provided	7	7	7	7	7	7	7	7	7	7
No. of women who attended during year	1441	1405	1353	1291	1208	1005	1404	1267	984	509
Total number of attendances during the year	7522	8001	7672	7234	6764	6795	5708	5176	5124	2550

It will be noted that the fall in the number of women attending our ante-natal clinics in recent years continued. This decline in the number of patients is due to the fact that more general practitioners are holding their own special surgeries for expectant mothers, and general practitioners have been invited to make use of our clinics free of charge to enable them to give ante-natal care for their patients and arrangements are made for our midwives to be in attendance at the general practitioners' special surgeries. An increasing proportion of general practitioners are beginning to use this service. A special ante-natal clinic is also held at Llwynypia hospital but usually expectant mothers attend this clinic towards the end of their pregnancy after first attending our own clinic or their family doctor.

SEE TABLE OVERLEAF

Talks on ante-natal Care and Preparation for Motherhood.

Talks on ante-natal care, mothercraft and relaxation classes were held at our clinics. As a rule the mothers who attend are expecting their first baby. The talks are very informal and general practitioners have been advised that their patients who had been attending their own ante-natal clinics would be welcome to attend our clinics for these talks and relaxation.

Mothers who attend these classes derive great benefit and are more relaxed at their confinement.

Unmarried Mothers

There are many angles to this problem and they may be divided into moral and health problems. Here we are concerned with the latter. The infant mortality rate for illegitimate children is much higher than that for children born in wedlock. The Minister of Health has urged local authorities to co-operate with and re-inforce the work of voluntary moral welfare associations. Some local health authorities themselves provide ante-natal and post-natal homes, besides employing a social worker; many others use their maternity and child welfare powers financially to assist voluntary associations which maintain ante-natal and post-natal homes providing for the wider needs of these women. Many women are successfully helped but others often of low-grade mentality are difficult and form one class of "problem family".

There has been a change in the attitude of society towards the unmarried mother and her child. Apart from special provisions during childbirth there is entitlement to insurance benefits under the National Insurance Act.

During 1968 a total of 5 unmarried mothers from Rhondda entered mother and baby homes and were helped in this way by the Health and Welfare Services Committee of the Rhondda Borough Council.

The following table shows the details of premature births occurring during 1968 according to weight at birth.

TABLE 43

PREMATURE LIVE BIRTHS																			
Weight at Birth	Born in Hospital				Nursed, entirely at home or in a nursing home				Total Births	Transferred to hospital on or before 28th day				Premature Still births					
	Died				Died					Died				Born					
	Within 24 Hours of birth	In 1 and Under 7 Days	In 7 and Under 28 Days	(1)	(2)	(3)	(4)	(5)		(6)	In 1 and Under 7 Days	In 7 and Under 28 Days	(8)	(9)	Within 24 Hours of Birth	In 1 and under 7 Days	In 7 and under 28 Days	In Hospital	At home or in a Nursing Home
Total Births	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)					
Not weighed	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
1. 2lb. 3oz. or less	3	1	1	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	
2. Over 2lb. 3oz. up to and including 3lb. 4oz.	5	1	2	-	-	-	-	-	-	-	-	-	3	1	-	-	-	-	
3. Over 3lb. 4oz. up to and including 4lb. 6oz.	17	2	4	1	1	-	-	-	2	-	-	-	4	-	-	-	-	-	
4. Over 4lb. 6oz. up to and including 4lb. 15oz.	19	-	1	-	3	-	-	-	-	-	-	-	2	-	-	-	-	-	
5. Over 4lb. 15oz. up to and including 5lb. 8oz.	54	-	-	-	5	-	-	-	1	-	-	-	2	1	-	-	-	-	
6. TOTAL	99	4	9	1	9	-	-	-	3	-	-	-	13	2	-	-	-	-	
			1	=	1,000g	or less													
			2	=	1,001-	1,500g													
			3	=	1,501-	2,000g													
			4	=	2,001-	2,250g													
			5	=	2,251-	2,500g													



## BIRTH CONTROL CLINIC

A special birth control clinic is held at Carnegie Welfare Centre and a woman medical officer is in attendance at fortnightly intervals. Birth control requisites are distributed by the Nursing Officer (Health Visitors). This special birth control clinic was established at Carnegie in 1935. Now, however, since the National Health Service (Family Planning) Act 1967, the concept of family planning clinics has changed dramatically. The Act received the Royal Assent on the 28th June and confers on local health authorities in London and Wales a general power, with the approval of the Minister of Health, to make arrangements for the giving of advice on contraception, the medical examination of persons seeking such advice and the supply (by prescription or directly) of contraceptive substances and appliances.

The Act extends the existing power of local health authorities in order to enable them to provide (or arrange for other bodies to provide) advice on contraception and supplies for any persons who need them on social grounds and not (as hitherto) only in medical cases, i.e. for women likely to suffer detriment to their health as a result of pregnancy. In so doing, the Act goes beyond the existing power limited under Section 28 of the National Health Service Act, 1946, to the prevention of illness, and constitutes a new and entirely separate provision replacing the powers relating to family planning under that Section.

It is anticipated that several family planning clinics will be set-up in the Borough eventually.

At the Special Clinic 17 new cases were seen for the following reasons :-

### NEW PATIENTS

Frequent Pregnancy	-	12
Toxaemia	-	1
Obstetric History	-	1
Nervous Disorders	-	1
Anaemia	-	1
Congenital Dislocation of hip	-	<u>1</u>
Total		<u>17</u>
Total no. of Revisits		127



### Infant Welfare Clinics

There was a slight rise in the number of children who attended our infant welfare clinics in 1968 compared with 1967.

Dr. Soper of Porth held his own special infant welfare surgery in addition to some other general practitioners in the Borough.

Attendances at Infant Welfare Clinics in Rhondda, 1968.

I N F A N T   W E L F A R E			
	Born 1968	Born 1967	Others Under 5 years
First Visits	1,013	1,018	559
Re-Visits	4,972	4,725	604

Our infant welfare clinics are on the whole well designed and adequately staffed. Only one clinic at the Y.M.C.A. building at Porth is situated in hired premises; and other infant welfare clinics are held at our seven clinics, four of which were purpose built, and three are premises adapted for this purpose. There is one clinic for every 12,500 of the population. The ratio for England and Wales is one clinic per 7,700 of the population but it must be remembered that there are many clinics in other parts of the country and even in the County of Glamorgan, which are in hired church halls and chapel vestries, many such premises being unsuitable.

The infant welfare clinics are usually manned by a medical officer, one health visitor, a clinic nurse and a food sales clerk. Mothers bring their babies throughout their early life for medical examinations at intervals but attendances are rare after the first year of life. Immunisation and vaccination are given against diphtheria, tetanus, whooping cough, poliomyelitis and smallpox. Mothers can also consult health visitors on baby care and management and a wide range of baby foods is available at reasonable prices.

A register is compiled of children who for a variety of reasons may develop such disabilities as deafness or backwardness and the progress of these children would be followed into school life, thus ensuring that they will receive the necessary medical treatment or the appropriate form of education suited to their requirements.

Medical Officers at infant welfare clinics may also refer children to family doctors for treatment for defects they discover at medical examinations, to the physiotherapist via the orthopaedic surgeons for treatment of orthopaedic defects and to the dental surgeons for dental care.

The following table indicates the quantity of Government foods distributed since 1957 and it will be noted that Government foods were also distributed free of cost to mothers with very low incomes.

Table 44

Year	National Dried Milk				Vitamin Preparations				Orange Juice	
	Full Cream		Half Cream		Cod Liver Oil (Bottles)		A & D Tablets (Packets)			
	Free	Paid	Free	Paid	Free	Paid	Free	Paid		
	Free	Paid	Free	Paid	Free	Paid	Free	Paid		
1963	716	3977	14	119	854	1202	219	1097	3741	13669
1962	626	4491	33	168	701	1168	193	1100	2672	12157
1961	249	2595	10	198	2691	1558	1397	458	1399	17291
1960	465	6015	38	305	4692	-	2571	-	1034	31998
1959	693	6503	29	423	4762	-	2114	-	1219	30214
1958	736	8702	44	495	5447	-	2512	-	890	33909
1957	724	17148	50	923	8571	-	2956	-	1624	53311
1964	602	3714	1	92	946	1237	170	1051	3573	17314
1965	375	3414	5	12	864	1163	192	934	3827	20965
1966	331	2817	9	-	1027	1088	145	927	4126	21333
1967	203	1449	-	-	1400	709	180	683	4518	19133
1968	323	917	-	-	1387	682	170	664	4700	18678

#### Dental Treatment

#### "Fluoridation of Water Supplies".

It has long been known that in those areas where there is a high level of fluoride occurring naturally in the public water supply, the incidence of dental caries is much reduced.

Controlled trials both in the U.K. and in North America have shown that the adjustment of the fluoride content of the public water supply to an optimum level of 1 part per million results in a considerable diminution of caries experienced in the community. Initially this is seen as a 50% reduction in the amount of caries experienced by the children but this, with adequate care can be carried into adult life.

Fluoridation as a public health measure has been opposed by a small but vociferous minority who see in this issue a menace of the body public. This is an opinion which, although sincerely held, is not borne out by scientific investigation, nor indeed by the health experience of those communities whose water supplies are naturally fluoridated. Nevertheless, no public health measure has been so rigorously tested over the years or subjected to so much expert scrutiny. It has been ratified as being both desirable and safe by dental and medical opinion and supported without reservation by the World Health Organisation, the General Dental Council, the British Dental Association, the British Medical Association, the Society of Medical Officers of Health and the Royal Society of Health, and endorsed by the County Councils Association and the Association of Municipal Corporations. The Ministry of Health is now actively engaged in encouraging local authorities to adopt it. Fluoridation can be carried out at the cost of a few pence per head of population and would achieve a reduction in the cost of dental care out of all proportion, not only directly but in terms of man hours lost through dental illness and its treatment. The concomitant reduction in dental pain and distress, particularly among children, cannot be too strongly desired.

Number of Visits for Treatment during year 1968.

TABLE 45

	Children 0 - 4 (incl.)	Expectant and Nursing Mothers
First Visit	228	42
Subsequent Visits	300	134
Total Visits	528	176
Number of additional Courses of Treatment other than the First Course commenced during year	25	5
Treatment provided during the year -		
No. of fillings	328	130
Teeth filled	282	109
Teeth extracted	339	48
General Anaesthetics given	137	3
Emergency visits by patients	29	4
Patients X-Rayed	4	15
Patients treated by Scaling and/or removal of stains from the teeth (Prophylaxis)	22	18



	Children 0 - 4 (incl.)	Expectant and Nursing Mothers
Teeth otherwise conserved	145	-
Teeth root filled	-	5
Inlays	-	-
Crowns	-	-
Number of Courses of Treatment completed during the year	207	15

Part B. Prosthetics.

Patients supplied with F.U. or F.L. (First Time)	3	-
Patients supplied with other Dentures	5	-
Number of Dentures supplied	13	-

Part C. Anaesthetics.

General Anaesthetics administered by Dental Officers	2	-
--	---	---

Part D. Inspections.

Number of Patients given First Inspections during year	237	42
Number of Patients in A and D above who require treatment	235	42
Number of Patients in B and E above who were offered treatment	235	42

Number of Dental Officer Sessions

(i.e. Equivalent Complete Half Days)	<u>For Treatment</u>	91
Devoted to Maternity and Child Welfare Patients	<u>For Health Education</u>	Nil

### Testing for Phenylketonuria.

With a view to preventing mental retardation associated with phenylketonuria by early diagnosis and treatment, Health Visitors carry out tests for phenylketonuria on all babies. This is done by examining the urine of six week old babies. The incidence of phenylketonuria is very low and no cases have come to light so far.

### Midwifery Service

The following information shows the number of home confinements and early discharges from hospital in 1968. Totals for previous years are given below. It will seem that again in 1968 there has been a considerable decrease in domiciliary births, e.g. a decrease of 27% compared with the 1965 figure. There has, of course, been a considerable increase in early hospital discharges. There was a 17% increase in the number discharged early in 1968 as compared with 1967.

#### Home Confinements and Early Discharges during year 1968.

<u>Home Confinements</u>		<u>Early Discharges</u>	
<u>Quarter Ended</u>			
March	58		244
June	71		260
September	60		217
December	47		235
TOTAL 1968	236	TOTAL 1968	956
" 1967	324	" 1967	893
" 1966	374	" 1966	774
" 1965	550	" 1965	648
" 1964	730	" 1964	369
" 1963	812	" 1963	312
" 1962	857	" 1962	175
" 1961	816	" 1961	128



The new maternity unit at Llwynypïa Hospital was opened in October, 1964 and this is one of the reasons for such a decrease. Another reason was the change in Maternity Benefits which became operative in February, 1965. Prior to this, women who were confined at home received a Home Confinement Grant of £6 as well as a Maternity Grant of £16. Those who entered hospital for the birth were only entitled to the Maternity Grant of £16.

In February, 1965, the system of payment was changed and one grant of £22 was paid whether or not a woman was confined at home or entered hospital. Consequently, more women then opted for hospital confinement.

On the 1st January, 1968, the strength of the Midwifery Service was as follows Viz :-

Full-Time Midwives	-	15
Relief Midwives	-	1
Home Nurse/Midwives	-	1

The number of births notified during the year under Section 2 or 3 of the Public Health Act is given below and a comparison is made with previous years.

TABLE 46

	1968	1960	1961	1962	1963	1964	1965	1966	1967
No. of births notified	1357	1595	1644	1689	1681	1636	1607	1468	1467
Live births	1335	1548	1606	1628	1634	1605	1569	1437	1426
Stillbirths	22	47	38	61	47	31	38	31	41
No. of hospital live births	1113	725	810	848	845	906	1039	1079	1113
No. of domiciliary births	222	823	796	841	789	699	530	358	313
No. of hospital stillbirths	18	35	26	40	38	21	32	24	36
No. of domiciliary stillbirths.	4	12	12	21	9	10	6	7	5

The percentage births which took place in hospital in recent years is given below :-

<u>1968</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>	<u>1967</u>
83	48	51	50	53	57	67	66	78

#### Health Visiting Service

The reduction in the infant mortality rate is as good a testimonial as one would wish to present to the health visitors on their work, but one may wonder that if the battle against the causes of infant ill-health has been largely won, whether health visitors are really necessary today? The answer to this is given in Section 24 of the Act itself which enlarges the scope of the Health Visitors' work to include the health of the whole family. The health visitor has lost her specialised groups interest and has become one of what is really a vast army of social workers. Health Education will become a major function of the health visitor.

The report of the working party on health visiting summarised the work of the health visitor as being primarily health education and social advice. Health education - the teaching of health - is indeed a large part of the health visitors' work; she visits homes of families, the ordinary, normal families, as well as those subject to stress or tensions, the young harassed mother and the lonely elderly citizen. The best service to the community can undoubtedly only be obtained where good working relationships are built up between the Medical Officer of Health, the health visitors, and general practitioners, and in these conditions the same excellent co-operation can be established between the family doctor and health visitor as has existed for so long between the family doctor, district nurses and midwives.

The health visitor has a special role in regard to those persons for whom the doctor is clinically responsible but who may not realise the help available particularly in the case of problem families and elderly people living alone. With mutual exchange of information, the burden of much of a family doctor's work can be eased by a health visitor in whom he has confidence and who he knows will consult and inform him when any special problems arise.

The College of General Practitioners and the Royal College of Nursing believe that the future of good general practice and good health visiting lies in the establishing of a successful working partnership between the family doctor and health visitor. The two Colleges believe it will be possible to arrange that health visitors can remain local authority employees responsible, administratively, to the Medical Officer of Health, while working within the framework of family doctor practice.

It will be noted from the table below that 3,655 aged persons were visited. This illustrates the principle outlined above that the work of the health visitor has changed. A great deal of the health visitor's time is taken up by visits to the elderly and such work is of inestimable value.

The number of elderly people is increasing because of the success of preventive and curative medicine in reducing the number of deaths at younger ages. The care of the elderly is now a national challenge. It is a human problem which cannot be solved by rules and regulations, reports, committees, or by this or that statutory organisation.

It is a problem that comes to each one personally for an individual choice, either to leave it to "someone else", or to face up to a moral responsibility of a very exacting nature. One can only say that the "easy way out" so often sows the seeds of long continued family discord and rarely brings any peace of mind; whereas doing what seems right usually turns out to be the right thing to do. Fortunately, the great majority of elderly persons are cared for at home by their relatives. It was thought, until quite recently, that the only place suitable for the vast majority of aged people was a hospital for the chronic sick or a Welfare Institution. Their compulsory removal to either often caused acute distress to the old people taken from their homes and near relatives. In recent years, there has been a great change of opinion and it is now realised that the elderly will generally not only be happier if they can pass their last years in their accustomed surroundings but also that their expectation of life will not be reduced but possibly increased and that their physical and mental health can be provided for adequately if they remain at home.



Whether home or institutional care is better in the case of any individual aged person is a matter for consideration and discussion by, on the one hand, the patient and his relatives and, on the other, the family doctor and the hospital and local authorities.

Since there are only a limited number of hospital and welfare beds set aside for the care of the elderly, it is obvious that the great majority of elderly people must be cared for at home and must become dependent on their relatives, friends, neighbours and upon local authority staff when they are ill or suffering from some infirmity. Unless this help is given they are likely to become seriously ill, and their numbers are so considerable that their chances of obtaining admission to hospital, particularly in the winter when there is so much sickness about, can be very slight. Again, if the hospital is to continue to treat the elderly sick, then their beds must be freed periodically by the discharge of elderly persons back home. Failure of relatives to receive back from hospital an elderly person or failure by a local authority to provide after-care, naturally leads to a bottleneck, which in turn means inability to admit elderly sick persons clearly in need of hospital treatment.

The Health Visitor can play a vital part by regular visiting of the aged. Loneliness is a great hardship to old people. They feel neglected by society, their friends and family, if no one visits them periodically and takes a personal interest in them and their welfare. Loneliness leads to apathy, indifference and mental depression- and as a result the elderly person neglects to take proper meals; to attend adequately to personal hygiene and appearance and to take a sufficient interest in her home conditions. She may also decline to go out and gradually become more and more of a hermit; eventually almost resenting anyone intruding into her life. The end result can be a marked deterioration in physical health and a mental state resembling mild dementia.

#### Nurseries and Child Minders Regulations Act, 1948.

The purpose of the Nurseries and Child Minders Regulations Act is to provide for the registration of nurseries and child minders with the object of safe-guarding the health and welfare of the children.

The Act places the duty upon the County Council to keep registers of and empowers them to supervise,

- (a) premises (referred to in this memorandum as day nurseries) in their area other than premises wholly or mainly used as private dwellings, where children are received to be looked after for the day or a substantial part thereof or for any longer period not exceeding six days; and
- (b) persons (referred to in this memorandum as daily minders) in their area who, for a reward receive into their homes children under the age of five to be looked after for the day or a substantial part thereof for any longer period not exceeding six days.

The Act does not apply to residential nurseries or to persons such as foster parents who provide homes for children apart from their parents.

The County Council may refuse registration if they are satisfied that the person employed or to be employed in a nursery, or the daily minder

is not a fit person or that the premises or the minder's house is not fit for the purpose.

In accordance with the provisions of the Act a Play Centre for certain children aged 2½ to 5 years of age was established at Maes-yr-Haf, Treallaw, under the supervision of the Warden of the Centre, Mr. F. B. Naylor.

The children who attend the Centre are those where the number of school children in the family exceed 5 thus giving considerable relief to a harassed mother. The maximum number of children allowed at the Centre is 15. The premises were inspected and a written report on the Centre and its staff was made by the Nursing Officer (Health Visitors). The Nursing Officer visits regularly and submits periodic reports.

The following table indicates the number of patients visited by Health Visitors during the year :-

TABLE 47

Patients visited by Health Visitors.

	<u>Number</u>
Children born in 1968	1,372
Children born in 1967	1,350
Children born in 1963-66	<u>3,147</u>
Total number of children	<u>5,869</u>
Persons aged 65 and over	3,655
Number of aged visited at special request of General Practitioner or hospital	1,604
Mentally disordered persons	Nil
Number of mentally disordered visited at special request of General Practitioner or hospital	Nil
Persons discharged from hospitals (not maternity or mental patients)	39
Number of above patients visited at special request of General Practitioner or hospital	33
Number of T.B. households visits	483
Number of households visited on account of other infectious diseases	6

The establishment of the Health Visiting/School Nursing Service at the end of December, 1968 was fifteen officers. There is also a Nursing Officer in charge. A temporary health visitor is seconded for duty with the Medical Research Council and is supernumerary to the establishment. All the health visitors and the Nursing Officer in charge possess the Health Visiting Certificate.

### Home Nursing Service

Section 25 of the National Health Service Act places on the Local Health Authority the duty to make provision in their area for securing the attendance of nurses on persons who require nursing in their own homes.

The primary function of the service is sick nursing but it should be noted that it also serves two other purposes :-

- (1) to support home medical supervision and economise the time of the family doctor;
- (2) to spare hospital beds by enabling more cases to be cared for at home and by making early discharge from hospital more often a practice of choice. The home nursing service, in other words, should be regarded as a handmaid of the family doctor and hospital service, and should be made as useful as possible to both.

Ordinarily, a nurse is summoned by the family doctor and works under his direction. The service is provided free, and arrangements are also made for lending sick-room equipment free of charge. This is done from the Personal Health Services Section. In many homes where financial resources are limited, the free loan of equipment adds to the effectiveness of the nursing service.

District Nurses co-operate well with the general medical practitioners - here there is commonly a real partnership. They carry out a very definite job of work, improvisation, and adapting techniques to circumstances has to be the keynote of the district nurse in her work. The volume of work in connection with the chronic sick continues to increase, particularly as the hospitals have as yet found no solution to the shortage of chronic sick beds. With an ageing population, this aspect will become more and more important.

There is not sufficient information about sickness in the home to estimate what demands are ultimately likely to be made on the home nursing service which is freely available according to need.

The establishment of Home Nurses in the Rhondda Borough is as follows :-

- 18 full-time Home Nurses
- 7 part-time relief Home Nurses
- 8 casual relief Home Nurses.



This represents an establishment of .18 per 1,000 population and the Command Paper "The Development of Community Care" presented to Parliament by the Minister of Health in 1963 considered that local authorities with well-developed home nursing services had a ratio of .18 per 1,000 population. The care of the elderly at home is a major factor in any assessment of the future needs of the home nursing service.

The following table shows the increase in the percentage of the aged cases attended and the number of visits made to the aged.

TABLE 48

Year	Total No. of Patients who were attended	Patients over 65 years	% of total cases over 65 years	Total No. of visits paid	Visits to Patients over 65 yrs.	Visits to Patients 65 yrs and over as a % of total visits
1957	2,791	1,000	36	90,462	44,738	49
1958	2,394	979	41	79,236	43,271	55
1959	2,356	923	39	79,223	46,527	59
1960	1,957	952	49	78,662	48,880	62
1961	2,207	957	43	83,767	49,334	59
1962	2,056	959	47	83,591	51,076	61
1963	1,955	946	48	80,474	52,711	65.5
1964	2,364	1,115	47	84,578	52,702	62.3
1965	1,958	1,004	51	80,393	52,108	65
1966	1,942	978	50	75,500	49,461	65
1967	2,081	1,105	53	73,077	47,825	64
1968	2,106	1,198	57	71,332	47,815	67

### Vaccination and Immunisation

The organised programme of immunisation at present in operation in Great Britain comprises procedures against six infectious diseases, i.e. diphtheria, whooping cough, tetanus, poliomyelitis, smallpox and tuberculosis.

As these procedures are carried out during childhood - most of them during the first two years of life - it is necessary to consider a number of factors when drawing up a programme of immunisation procedure. Such factors are :-

1. The provision of the best possible immunity against each particular disease.
2. The number of injections should be as few as possible. It has been found, in practice, that it is advantageous to combine the diphtheria, tetanus and whooping cough vaccines into one "triple antigen". This results in one injection instead of three.

3. The risk of causing harmful reactions or complications must be kept at a minimum.
4. Due regard must be had for the age period at which a particular disease risk is at its greatest.

Obviously, no programme will completely fulfil all the ideal requirements; it will necessarily be a compromise and will need revising from time to time. Furthermore, regard must be had to the fact that the numbers of effectively vaccinated and immunised children in the community tends to drop sharply unless constant effort is made to encourage the parents to take advantage of the protection offered. Particular attention must be paid to those children who are not regular attenders at infant welfare centres.

### Vaccination against Poliomyelitis

Poliomyelitis is a serious disease. It can cripple for life - it can even kill. Vaccination reduces the chances of contracting the disease to negligible proportions. In those very few cases in which the disease is contracted in spite of vaccination, the effects are far less serious than in the unvaccinated. Parents having their children vaccinated have their minds set at ease knowing that one of the terrors of childhood and early adulthood has been reduced, if not eliminated altogether. Many millions of people have already received the vaccine and, as a result, the number of cases of poliomyelitis has been dramatically reduced to a small fraction of its former magnitude. But until such time as the whole population has been vaccinated, the risk of contracting the disease, or of a small epidemic starting amongst the unvaccinated, remains very real indeed.

Most of the vaccine used nowadays is the oral type (given by mouth), in the case of babies, a few drops of the vaccine are dropped directly into the baby's mouth or given with a teaspoonful of syrup. In the case of older children and adults, the vaccine is taken on a lump of sugar.

The following table indicates the progress of the Poliomyelitis vaccination campaign since 1959.

Immunisation against Diphtheria, Whooping Cough and Tetanus.

Although a considerable number of children are vaccinated against diphtheria, there is considerable room for improvement. Mothers of new born babies are sent a special letter by me pointing out the importance of having their babies immunised against diphtheria, whooping cough and tetanus. Health Visitors also advise parents on this matter and so do the excellent publications by the British Medical Association and Advertisers giving advice to mothers on how to bring up their babies. Nevertheless, only about two thirds of the mothers have their babies immunised.

Almost all children who attend infant welfare clinics are immunised and it is proposed, as was done in 1965, to conduct a special drive to persuade parents of children who do not attend our clinics to have their babies protected against these diseases which can disable children or cause untimely death.

The following tables indicate the courses of treatment against poliomyelitis, Diphtheria, Whooping Cough and Tetanus given in 1968.

Full Courses of treatment against  
Poliomyelitis, Diphtheria, Whooping Cough and Tetanus.

Vaccination of Persons under 16 years completed during 1968.

TABLE 49 Completed Primary Courses - Number of persons under age 16.

Type of Vaccine or Dose	YEAR OF BIRTH					Others Under Age 16	Total
	1968	1967	1966	1965	1961 to 1964		
1. Quadruple D.T.P.P.	-	3	-	-	-	-	3
2. Triple D.T.P.	35	446	27	14	13	6	541
3. Diphtheria/ Pertussis	-	-	-	-	-	-	-
4. Diphtheria/ Tetanus	-	1	1	1	3	1	7
5. Diphtheria	-	-	-	-	-	-	-
6. Pertussis	-	-	-	-	-	-	-
7. Tetanus	-	-	2	2	8	9	21
8. Salk	-	-	-	-	-	-	-
9. Sabin	28	574	103	30	38	8	781
10. Measles	-	6	7	23	335	2	373



TABLE 50 Reinforcing Dose - Number of persons under age 16

Type of Vaccine or Dose	YEAR OF BIRTH					Others Under Age 16	Total
	1968	1967	1966	1965	1961 to 1964		
1. Quadruple D.T.P.P.	-	-	-	-	-	-	-
2. Triple D.T.P.	-	-	-	-	-	-	-
3. Diphtheria/ Pertussis	-	-	-	-	-	-	-
4. Diphtheria/ Tetanus	-	11	299	47	644	7	1,008
5. Diphtheria	-	-	-	-	-	-	-
6. Pertussis	-	-	-	-	-	-	-
7. Tetanus	-	-	-	-	-	-	-
8. Salk	-	-	-	-	-	-	-
9. Sabin	-	2	6	32	890	15	945
10. Measles	-	-	-	-	-	-	-

Prevention of Illness - Care and After-Care

The risk of breakdown, after in-patient treatment and a consequential re-admission to hospital, depends in large measure on the quality of home care available. It is generally recognised that the family doctor has a special part to play in weighing the circumstances of individual cases, deciding what is needed and advising his patient accordingly. But there is often much he would like to do for a patient that he cannot accomplish unaided, e.g. re-housing, home-help, after-care for the mentally ill, home nursing, etc. Such needs may be apparent but their fulfilment is usually beyond the resources of the family doctor. To meet them, a range of non-medical help is available which may conveniently be referred to as CARE and AFTER-CARE.

Widely interpreted, the expression includes services provided by :-

- (1) hospital authorities (the almoner service);
- (2) local health authorities;
- (3) the Ministry of Labour (rehabilitation schemes, disablement, rehabilitation officers);
- (4) certain industrial undertakings (rehabilitation schemes).

Care and after-care services are intended to support medical services, with the object of securing as complete a recovery as possible and here we are concerned with the duties of the local Health Authority under Part III of the National Health Services Act of 1946.



TABLE 51

SCHOOL HEALTH EDUCATION PROGRAMME

Subject	No. of Talks
Dental Hygiene	568
Hygiene	603
Prevention of Accidents	56
Smoking and Health	40
Nutrition: Food Hygiene	55
Feet and Posture	111
Preparation for Parenthood (including sex education, V.D. and menstruation)	33
Mothercraft	1
Drug Addiction	Nil
Others :-	
Importance of wearing spectacles	1
Care of Spectacles	2
Care of the skin	3
Care of the eyes	16
Care of the hair	9
Care of the teeth	4
Care of the feet	4
Handkerchief Drill	2
Work of the Health Visitor	1
Good Manners	1
General Health	1
Immunisation	1
	<u>1,512</u>

TABLE 52

GENERAL HEALTH EDUCATION PROGRAMME

Subject	No. of Talks
Ante Natal and Infant Welfare	-
Care of Aged and Handicapped	-
Dental Health	-
Nutrition and Food Hygiene	-
Drug Addiction	-
First Aid	-
General Hygiene	-
Prevention of Accidents	-
Preparation for Parenthood (including sex education, V.D. and menstruation)	-
Smoking and Health	-
The Health Services	2
TOTAL	2

S M O K I N G   A N D   H E A L T H

STATEMENT BY THE MINISTER OF HEALTH  
THE RIGHT. HON. KENNETH ROBINSON M.P.  
IN THE HOUSE OF COMMONS ON FRIDAY,  
27th JANUARY, 1967.

The Government has considered the suggestions which have been made by many Hon. Members and others that steps should be taken to restrict smoking in such places as cinemas, theatres, restaurants, shops and offices. There is no doubt that many non-smokers feel great discomfort among people smoking in confined places. Breathing smoke-laden air may also aggravate the symptoms of people suffering from certain disabilities such as asthma or bronchitis, in some cases to the extent that they are forced to avoid places or situations in which high concentrations of tobacco smoke might occur, e.g. in cinemas. Also, people who have given up smoking, or are trying to do so, are subjected to strong group pressure towards smoking if they sit for any length of time in the vicinity of those who are smoking. The number of non-smokers has increased substantially in recent years and they now constitute about 46 per cent. of the adult population. Surveys have also shown that even among smokers a substantial minority favour a ban on smoking in cinemas, restaurants and theatres.

The Government feel that it would not be appropriate to seek powers for compulsory restrictions on smoking in such places, but that the proprietors should consider the interests and wishes of their clients and customers in the light of the considerations which I have mentioned, and act accordingly. "No Smoking" notices have been displayed and respected by the public on a voluntary basis for many years in some big department stores, most concert halls and many theatres. The Government urges other proprietors to consider extending this practice by asking the public not to smoke on their premises, or by setting aside parts of large premises, such as restaurants, for non-smokers. My Rt. Hon. Friend, the Secretary of State for Scotland, and I are writing to the main trade associations asking them to draw these considerations to the attention of their members. We are ourselves drawing them to the attention of the public transport authorities, and of hospital and local authorities. Government Departments are considering what action each should take in relation to their offices which are open to the public.

MINISTRY OF HEALTH

The following table indicates the number of deaths in the Rhondda from Bronchitis and lung cancer in 1968.

TABLE 53

BRONCHITIS

	<u>Male</u>	<u>Female</u>	<u>Total</u>
1956	84	24	108
1957	92	25	117
1958	95	34	129
1959	74	20	99
1960	75	9	84
1961	115	30	145
1962	83	22	105
1963	75	27	102
1964	85	26	111
1965	79	14	93
1966	88	26	114
1967	66	16	82
1968	79	15	94
<u>Average</u>	<u>79</u>	<u>21</u>	<u>100</u>

The death rate in the Rhondda among men from Bronchitis is approximately twice as high as that for England and Wales.

TABLE 54

LUNG CANCER

	<u>Male</u>	<u>Female</u>	<u>Total</u>
1956	28	1	29
1957	25	4	29
1958	16	3	19
1959	37	6	43
1960	32	2	34
1961	28	1	29
1962	30	2	32
1963	28	2	30
1964	44	2	46
1965	38	9	47
1966	36	4	40
1967	37	4	41
1968	39	6	45
<u>Average</u>	<u>32</u>	<u>3</u>	<u>36</u>



# Prevention of Accidents.

Health Visitors, Midwives, Home Nurses and Home Helps are given guidance on the advice they should give to householders on how to avoid accidents. Home Helps are not normally asked to act as health educators but, as they regularly visit aged and infirm people who live alone, they are ideally suited for this task.

The loss of life due to accidents in the home is considerable. Fatal accidents in the home are more frequent than on the roads and the risk of death in this country from accidents has been illustrated in this way.

Railway Accidents:	A little less than one death a day.
Air Accidents:	One death every four days.
Road Accidents:	Nineteen deaths a day.
Home Accidents:	Twenty-three deaths a day.

TABLE 55

Number of deaths attributed to  
accidents in the home - 1968.

## MALES

Type of accident	Under 1	1+	2-4	5-54	55-64	65-64	75+	Total
Burning	-	-	-	1	-	-	-	1
Fractured Femur	-	-	-	-	-	-	4	4
Head Injury	-	-	-	-	1	-	-	1
Multiple Injuries	-	-	-	-	-	-	1	1

## FEMALES

Type of accident	Under 1	1+	2-4	5-54	55-64	65-74	75+	Total
Burning	-	-	-	1	1	-	3	5
Fractured Femur	-	-	-	-	-	-	7	7
Head Injuries	-	-	-	-	-	-	4	4
Multiple Injuries	-	-	-	-	1	-	-	1

## Problem Families

Voluntary agencies and statutory authorities up and down the country have long been aware that there exists a hard core of unfortunate families needing a great deal of care, supervision and help. Their cost to the community in terms of money and services is also well known and the records of health and welfare departments contain ample evidence that a great deal of time of local authorities and other bodies has to be devoted to these families and the problems they create.

Although the problem family is hard to define, it is not usually difficult to identify in practice. Overcrowding, uncleanliness and bad management are the rule and mental backwardness and temperamental instability are common factors. One outstanding characteristic common to all problem families is that one or more members of the family is weak in character and lacking in resolve, so that the family as a whole does not maintain, unaided, the standards of cleanliness and social conduct demanded by the community.

During 1968, a Co-ordination Committee consisting of various social workers met every other month under my chairmanship to discuss the problem families in the Borough of Rhondda.

Reports on individual families were prepared for the Committee by Health Visitors who regularly visit them, and considerable material aid in the form of bedding, clothing, furniture, etc., was afforded them via voluntary agencies such as the W.V.S.. During the year, 8 families were supervised by the Committee, and 6 families remained under supervision. Often, little progress is made, which can be disheartening, but there is no doubt that without the support given to these families by members of the Committee, the families would deteriorate still further. Obviously, a problem family can only be effectively dealt with if the services provided are of a comprehensive nature. The Family Case-Worker - a worker who is willing and able to teach dull, uncomprehending housewives, to roll up his sleeves and work in problem households, to help personally with cleaning and decorating, repairing broken furniture and doing all kinds of odd jobs, can reclaim a proportion of problem families. Anything less than this will provide to be inadequate and merely "scratching the surface" of the problem.

## Tuberculosis

Respiratory tuberculosis is certainly a gradually disappearing disease in Britain accounting for only a fraction of the deaths attributable to it in past years. In particular, the decline in the last decade is attributed by most authorities to the effects of new antibiotics such as streptomycin. Provided the rate of progress continues, there is a possibility that the disease may become as rare in this country in ten years time as diphtheria has become today.

Briefly, the following are the measures that need to be stressed in the control of the disease :-

- (1) A strict control of individuals affected by the disease, including a thorough tracing of contacts.
- (2) B.C.G. vaccination for adolescents and individuals and groups at special risk.
- (3) Adequate immigration laws and procedures to prevent unascertained open cases of tuberculosis from entering the country.

In 1968, there were 25 notified cases of pulmonary tuberculosis compared with 20 cases in 1967 as the undermentioned table shows.

TABLE 56  
Notifications of Respiratory Tuberculosis by Sex and Age.  
Age Range.

	0-4	5-9	10-14	15-19	20-24	25-34	35-44	45-54	55-64	65 & Over	Total
1960 Male	1	-	-	3	2	2	8	14	12	6	48
Female	-	2	1	5	3	4	1	3	-	-	19
1961 Male	1	1	-	1	1	2	4	9	8	5	32
Female	-	-	-	-	2	2	2	3	1	1	11
1962 Male	2	1	-	-	4	4	4	8	8	8	39
Female	-	-	-	3	4	5	1	-	11	-	14
1963 Male	-	-	-	2	1	1	1	4	9	8	26
Female	-	-	-	1	2	2	3	1	11	-	10
1964 Male	-	1	-	-	1	1	6	12	8	10	39
Female	1	1	-	2	6	2	1	1	-	-	14
1965 Male	-	-	-	1	2	1	3	10	6	7	30
Female	1	-	-	5	2	3	1	-	1	2	15
1966 Male	-	1	-	-	2	2	1	4	13	6	29
Female	-	-	-	1	2	-	2	-	-	-	5
1967 Male	-	1	-	1	-	1	4	3	5	3	18
Female	-	-	-	-	-	1	1	-	-	-	2
1968 Male	-	-	-	1	1	-	2	4	2	8	18
Female	-	-	-	1	-	-	1	2	1	2	7



B.C.G. Vaccination for School Children.

This vaccine is offered to four groups of people -

- (a) people who have been in contact with tuberculous patients.
- (b) infants born to tuberculous parents.
- (c) school children aged 13 years or over (it can be given to those of ten years and over).
- (d) nurses, doctors, and medical superintendents who come into contact with tuberculous patients.

The following table indicates the number of children vaccinated by Assistant School Medical Officers under the Authority's arrangements.

TABLE 57

Children aged 13 and over.

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
No. skin tested	2671	1488	1205	1009	1217	921	1038	Ni1	282	947
No. found positive	422	239	205	289	307	242	256	Ni1	53	66
No. found negative	2107	1134	850	627	910	678	782	Ni1	229	881
No. Vaccinated	2102	1132	847	557	893	678	781	Ni1	226	878

B.C.G. protects the school child from tuberculosis and this immunity continues for at least ten years. Unfortunately, because vaccination can be a little painful, a small proportion of school children appear to persuade their parents not to give their consent to vaccination.

However, there was a considerable improvement in 1968 as compared with 1967 and 1966 in relation to the number of children vaccinated against tuberculosis.



The after-care of tuberculous patients is the responsibility of the Health Visitors. In carrying out their duties they explain to their patients the implications of their illness and show how it can be managed. If the patient has been discharged from hospital with a positive sputum, Health Visitors make investigations into the home circumstances to enable the Authority to decide whether a bed and bedding should be provided in order to isolate the patient from his family when he continues to live at home. Such instances are rare because it is now possible in the majority of cases for patients with positive sputum to remain in hospital until their sputum is negative. Nevertheless, a long period of chemotherapy is required after bacillae have disappeared from the sputum and health visitors assist in ensuring that the patient recuperating at home co-operates with the Chest Physician in carrying out his advice.

Chiropody Service.

Loss of mobility due to foot trouble may be a contributory cause of an elderly person's need for residential care. It can often be prevented by effective and adequate chiropody treatment. Before 1959 chiropody services for the elderly were provided in the main by voluntary organisations. In 1959 local health authorities were authorised to provide chiropody. The great majority of them now provide services direct. Patients obtain the service in local authorities' Clinics and, when necessary, at home.

In the Rhondda Borough the service is provided free to aged people (i.e. women over 60 years and men over 65 years of age), registered handicapped persons, blind persons and expectant mothers who require chiropody treatment and where the family doctors make a recommendation to this effect. Treatment is given by fully qualified chiropodists at clinics in the Borough and home visits are also made to house-bound patients.

The service is an important one and the demand for it increased day by day. To be of real value treatment should be regular and continuous. If the interval between treatments is over long as is the case at the present time, it means that basic treatment must start all over again. This is detrimental to the foot health of the community. Staffing establishment of the service should be on a realistic basis and plans made to staff the service so that the recommended cycle of treatment should not exceed 6 weeks.

During the year, 2,419 persons received treatment compared with 2,042 patients during the previous year.

The following table gives details of the number of patients who received treatment during the year.

TABLE 58  
CHIROPODY 1968.

No. of patients who received treatment during the year 1968.

Treatment Centre	T o t a l	Aged		Registered Handi- capped Persons				Expec tant Moth- ers.	Others	
				Blind		Physically Handi- capped				
		M	F	M	F	M	F		M	F
Ynyswen Clinic	359	73	237	1	1	3	7	1	-	36
Ystrad Clinic	253	46	171	-	-	3	7	-	-	26
Court House Clinic	168	32	113	1	1	3	5	-	-	13
Trealaw Clinic	143	29	99	-	-	2	3	-	1	9
Penygraig Clinic	158	26	114	-	1	1	3	-	-	13
Ynyshir Clinic	102	21	64	-	1	3	1	-	-	12
Ferndale Clinic	348	71	226	-	2	3	5	2	-	39
Patient's Home	867	178	617	2	4	22	29	-	-	15
Clydach Court and Fairfield Homes for the Aged	100	43	57	-	-	-	-	-	-	-
Totals	2498	519	1698	4	10	40	60	3	1	163
No. of treatments given during the year, 1968.	6253	1253	4213	8	23	105	185	4	1	461

The following table shows the Chiropody case load at the end of 1968.

TABLE - 59

Treatment Centre	Awaiting First Treatment	Under Treatment	Total No. of Patients.
Clydach Court and Fairfield	-	112	112
Ynyswen Clinic	-	357	357
Ystrad Clinic	-	281	281
Court House Clinic	-	156	156
Trealaw Clinic	-	161	161
Penygraig Clinic	-	144	144
Ynyshir Clinic	-	109	109
Ferndale Clinic	-	367	367
Patient's Home	3	938	941
TOTALS	3	2,625	2,628

Provision of Convalescence.

Arrangements are made for convalescent holidays to be provided to patients on medical advice to The Rest Convalescent Home, Porthcawl. The number of bed weeks allocated to the Borough is 90. A large number of applications are received and in the case of the chronic sick, priority is given to patients who have not been to The Rest before.

MEDICAL COMFORTS - YEAR ENDED DECEMBER, 1968.

<u>Item</u>	<u>No. Requested</u>	<u>No. issued</u>
Rubber Sheeting	157	157
Bed Rests	133	133
Bed Pans	120	120
Walking Aids	96	90
Urinals	87	87
Wheelchairs	88	59
Walking Sticks	68	63
Commodes	56	47
Crutches	52	48
Cradles	48	48
Air Rings	48	47
Foam Pads	30	30
Bed Tables	6	5
Feeders	5	5
Bed Boards	3	3
Air Cushions	3	3
Oxford Hoists	2	2
Air Bed	1	-
	<u>1,003</u>	<u>947</u>
Total No. of Issues from Office ...		923
Total No. of Issues by Nurses ...		24
	<u>No. Requested</u>	<u>No. Issued</u>
Quarter ended March	254	230
" " June	229	164
" " September	217	169
" " December	303	<u>384</u>
	<u>1,003</u>	<u>947</u>



## Home Help Service.

The home help service should not be regarded as a separate welfare service complete in itself, but is best seen as complementary to the domiciliary nursing services and the hospital services. The nursing of the chronic sick at home and the care of the aged and infirm has become a prominent feature of our times and the joint effect of the home help and domiciliary nursing services in relieving the pressure on hospital accommodation and improving the desired turnover of hospital beds is an important contribution to the National Health Services.

Most of the cases require the services of a home help for a long period of time and here again, as with other services, we are faced with high costs. Many chronic sick cases and most elderly people have incomes which qualify them for the free services of a home help. Thus more and more it is found that larger numbers of home helps are having to work in homes from which the service received no income.

The home help service has become a very important part of the Local Health Authority's work. The Minister of Health emphasises the fact that in the future more importance is to be placed upon "community care" and consequently it can be assumed that the home help service is to play an increasingly important part in the future of the Health Services.

It is the intention of the local Health Authority under its present proposals for the development of community care (i.e. its Ten-Year Plan) to increase its home help establishment two-fold.

The County Council have agreed that the ratio of home helps in the Rhondda shall continue to exceed that for the County as a whole. At present, about one-sixth of the home helps have been allocated to the Rhondda Borough and the County Council propose to continue this arrangement.

The following table indicates the type of household which received assistance in 1968 and comparative figures for previous years are shown.

TABLE 60

	<u>1959</u>	<u>1960</u>	<u>1961</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>	<u>1965</u>	<u>1966</u>	<u>1967</u>	<u>1968</u>
Maternity	21	12	11	6	7	4	5	4	7	7
Tuberculosis and Chronic Sick	55	68	53	41	7	129	165	147	162	178
Aged	565	598	645	663	777	730	870	887	964	1023
Blind	12	10	17	24	8	2	8	9	9	8
Mental	-	-	-	7	8	22	2	3	4	6
Others	15	11	7	-	-	-	13	12	13	18
	668	699	733	741	818	887	1063	1062	1159	1240

In conclusion, I wish to pay tribute to the remarkable way in which the Rhondda home helps do their work under the guidance of the Home-Help Organiser, Miss M. E. Bowen. The home help service is very much a personal service and householders can become attached to their home helps and look forward to their weekly visits. When old people are ill or troubled, it is the home help that they invariably send for. Because of this closeness that exists between the home help and her patients, the home help notified me through her supervisor of any impending breakdown, so that the general practitioner can be informed and greater support given from the home nursing and health visiting services.

#### MENTAL HEALTH SERVICE

#### COMMUNITY CARE

A normal person relies on those with whom he lives and works for understanding, sympathy and co-operation. When there is mental disorder these supports may be seriously undermined or even destroyed. The mental health services therefore aim at strengthening them or constructing others in their place. Here the main need is for an effective body of social workers, including mental welfare officers, working closely with general practitioners and hospital staff. By providing a personal service of advice and support for the mentally disordered and for their families, the social worker can do much to prevent a breakdown either of the mentally disordered person, or of his social relationships, to obviate the need for admission or readmission to hospital, or to aid rehabilitation. Through personal contact the social worker can also establish what other services are appropriate and try to ensure that the mentally disordered and their relatives take proper advantage of them.

One can expect a ratio of at least 2 mentally ill persons and 3 mentally subnormal persons per thousand population living in the community who will need community care. The Younghusband Report considered that an area with a population of 100,000 should have one psychiatric social worker and four mental health officers, a total of five officers.

In the Rhondda, officers dealing with the community care of the mentally ill are referred to as Health Welfare Officers.

During the year Health Welfare Officers maintained close links with general practitioners, after-care visits were made to mentally ill patients at the request of medical superintendents of hospitals and written reports by the Health Welfare Officers are sent at regular intervals to the medical superintendent concerned. The progress of particular patients is discussed at monthly intervals held between the consultants and the health welfare officers. Most patients and their relatives are very appreciative of the advice and support given by these officers.

The modern view of mental illness and subnormality was expressed in the Report of the Royal Commission on the Law relating to Mental Illness and Mental Deficiency (1957), namely that the conditions are not fundamentally different from physical illness, injury or malformation in any respect which matters in the provision of remedial services.

Important trends have included :

- (1) The encouragement of voluntary hospital admission and treatment.
- (2) The treatment of mental illness in general hospitals and the establishment of acute Psychiatric units for outpatients treatment.
- (3) A shift in emphasis from care in hospital to care in the community.
- (4) More extensive provision for care and aftercare by local authorities and also hostel accommodation.
- (5) The encouragement of activity varying from occupational therapy, pure and simple, to paid industrial or other work.
- (6) A more liberal attitude towards the freedom of movement of patients both in hospital and outside and a rejection of the old regime of locked doors and padded cells, facilitated by tranquilising and other drugs developed in recent years.

The intention underlying these trends has been a desire to retain the social and occupational roots of the mentally disordered in the community to which they belong and preferably in their own homes, and to reduce the duration of hospital stay (where considered necessary) to a minimum.

TABLE 61

Number of Mentally Handicapped Patients -  
31.12.68.

	Sub Normal				Severely Subnormal			
	Under Age 16		16 and over		Under Age 16		16 and over	
	M	F	M	F	M	F	M	F
Total ... ..	4	1	70	42	17	10	37	27
Attending Day Training Centre	3	1	8	9	10	9	18	3
Receiving home visits but not receiving care at Training Centre, hostel or home training	1	-	62	33	7	1	19	24



TABLE 62

	Number of Mentally ill Patients				Total of all groups of mentally disordered Patients (Mentally ill and Mentally Handicapped)				
	Under Age 16		16 and Over		Under Age 16		16 and Over		Grand Total
	M	F	M	F	M	F	M	F	
Total	-	-	115	177	21	11	222	246	500
Attending Day Training Centre	-	-	-	-	13	10	26	12	61
Receiving home visits but not receiving care at Training Centre, hostel or home training	-	-	115	177	8	1	196	234	439

TABLE 63

No. of Patients referred to local Health Authority in 1968. Mentally Ill.

	Under Age 16	16 and Over		Psychopathic	Total
		M	F		
General Practitioners	-	66	62	-	128
Hospitals, on Discharge from in-patient treatment	-	63	86	-	149
Hospitals after or during out-patient or day treatment	-	5	5	-	10
Police Courts	-	7	2	-	9
Other sources	-	24	21	-	45
Total	-	165	176	-	341



TABLE 64

No. of Patients referred to local Health Authority in 1968.

	T o t a l	Subnormal				Severely Subnormal			
		Under Age 16		16 and Over		Under Age 16		16 and Over	
		M	F	M	F	M	F	M	F
General Practitioners	3	-	-	2	1	-	-	-	-
Hospitals, on discharge from in-patients treatment	-	-	-	-	-	-	-	-	-
Hospitals after or during out-patient or day treatment	-	-	-	-	-	-	-	-	-
Local Education Authorities	5	4	-	-	-	1	-	-	-
Police and Courts	-	-	-	-	-	-	-	-	-
Other sources	2	-	-	-	-	-	-	1	1
TOTAL	10	4	-	2	1	1	-	1	1

TABLE 65

Community Care Visits undertaken by Health Welfare Officers in 1968

Pre Care Visits		After Care Visits		Subnormal			
				Reports		No Change	
M	F	M	F	M	F	M	F
290	444	919	1,390	258	167	278	260

Miscellaneous Visits

62

Non-effective Visits

377

Total Visits

4,445

W E L F A R E     S E R V I C E S

FOREWORD

I have pleasure in submitting to the Health, Housing and Social Services Committee a report on the work of the Welfare Services Section of my Department, dealing with the provisions of welfare for the aged, physically handicapped, deaf, blind and partially sighted, under the statutory provisions of the National Assistance Act, 1948, and the Scheme of Delegation of Welfare functions by the Glamorgan County Council to the Rhondda Borough Council in 1962.

With regard to the provision of Residential Accommodation at the 31st March, 1969, Fairfield, Treallaw; Clydach Court, Treallaw; and Ferndale House, Ferndale; accommodates 133 residents and Pentre House, Pentre, a 36-bedded Home is scheduled for completion by June, 1969.

Services for physically handicapped, the blind and partially sighted, and the deaf, have been maintained. These include registration, issue of pastime occupation, materials, aids to overcome disabilities, adaptations to premises and mainly a good supportive visitation service.

With reference to the work of the Department in general, I would like to take this opportunity of thanking all members of my staff for their loyal support and help of my fellow Chief Officers and their staffs for their continued co-operation. In addition, Mr. I. R. Jenkins, Director of Welfare Services, Glamorgan County Council, and his staff.

Finally, I would like to record my appreciation to the Chairman and Members of the Health, Housing and Social Services Committee for their help and understanding.

## RESIDENTIAL ACCOMMODATION

It is still the policy of the department to provide, where possible, domiciliary services to the aged and handicapped persons, thus, enabling them to continue living as long as possible in their own homes, as a consequence, a higher proportion of residents cared for in your Homes are substantially infirm. Those who were relatively ambulant when admitted to your Homes some years ago, are also becoming very infirm and the demand for accommodation today is on the increase, so that only the most infirm and needy can be admitted. The pattern of staffing has changed very little since 1948, but hopes are high that some increase will be given in the very near future.

Living and working with the aged, is not always an easy task, and many difficulties can arise, and your Social Welfare Officers, Matrons, Warden, and particularly your staff in the Homes, display in their day-to-day activities, the necessary tact, patience and understanding required to help the applicants and residents to adjust to a new way of living and of giving them the feeling of belonging. This understanding is very necessary to residents in the period prior to admission and in the first few weeks of entering a Home, for the period of transition can be very difficult, but it is very satisfying to find that most of them soon settle down in their new way of life.

Section 21(2) of the Act stipulates that a 'local authority shall have regard to the welfare of all persons for whom accommodation is provided and in particular, to the need for providing accommodation of different descriptions,' this means the provision of accommodation for persons needing care and attention by reasons of varying kinds of disabilities, ie. physically or mentally handicapped who are not in need of hospitalisation. In providing accommodation for these persons, the Borough use their power to make agency arrangements with voluntary bodies specialising in this form of care, sponsor a number of people at such Homes outside the Borough. For the most part these have been young persons suffering from severe handicaps, such as multiple sclerosis, epilepsy, spasticity and blindness. When agency arrangements are made in these circumstances, care is taken to ensure that the facilities and amenities are of a standard comparable to our own Homes. The opening of 'Ynysdawdre' a Home for Young Handicapped Persons, by the Glamorgan County Council will in all probability, help to minimise the need for such agency arrangements in the future.



TABLE 66

Admission and Discharges - 1st April, 1968-31st March, 1969.

Name of Home	New Admissions		Discharges		Deaths		Transfers to Hospitals		Other homes		Commun- ity.	
	M	F	M	F	M	F	M	F	M	F	M	F
Clydach Court	8	14	6	14	2	6	4	2	-	-	-	6
Fairfield	5	7	5	6	3	2	-	2	-	1	2	1
Ferndale	5	5	5	5	1	4	4	-	-	-	-	1
Grand Total	18	26	16	25	6	12	8	4	-	1	2	8

TABLE 67

Classification of Residents by Age and Sex as at 31st March, 1969.

Name of Home	Under 60		60 - 64		65-69		70-74		75-79		80-84		85-89		90+		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Clydach Court	-	4	-	2	6	2	6	5	5	9	4	10	2	6	-	2	23	40
Fairfield	1	-	-	-	3	1	-	3	9	4	1	3	4	2	1	3	19	16
Ferndale	-	-	2	3	-	1	7	4	3	6	3	4	-	-	-	2	15	20
Grand Total	1	4	2	5	9	4	13	12	17	19	8	17	6	8	1	7	57	76



## ORDINARY RESIDENCE

As at 31st March, 1969, one male resident at Ferndale House was being provided with accommodation on behalf of another authority, Coventry City Council, in accordance with the provision of Section 24 of the National Assistance Act, 1948. Monmouthshire County Council providing accommodation for one female resident on your behalf together with the reciprocal arrangements with Glamorgan County Council.

## ACCOMMODATION PROVIDED BY VOLUNTARY ORGANISATIONS

Under the provision of Section 26 of the National Assistance Act, 1948, the Borough accepts financial responsibility for the maintenance of a number of people in special homes run by voluntary organisations outside the Borough.

Set out hereunder are details of persons so accommodated at the 31st March, 1969.

TABLE 68

<u>HOME</u>	<u>Men</u>	<u>Women</u>
Dan - y - Bryn Cheshire Home - Radyr	3	2
Coombe	2	-
Caerleon	-	1
Kyre Park House (Spastics Soc.) Worcester	-	1
Mena House (Spastics Society) Penarth.	-	1
Royal School for the Blind, Leatherhead	-	1
Glynn Vivian Home for the Blind, Mumbles.	1	-
Langho Colony, Blackburn.	1	-
The Star and Garter Home, Richmond	1	-
Dorincourt, Leatherhead.	-	1
Crosfield House (British Legion), Bwlch	2	-

## HOMES FOR THE AGED, ESTABLISHMENT

As at 31st March, 1969, the staff at Fairfield and Ferndale consisted of a resident Matron, three attendants on the aged, one Domestic/Attendant Full-time three Domestic assistants, one cook, two night attendants on alternative shifts, one full time gardener/handyman at Ferndale and a part-time Labourer/handyman at Fairfield.

At Clydach Court the establishment consisted of a resident Warden and Matron, one nurse (deputising for Matron in her absence) six full-time Attendants (including one male) one part-time Domestic Attendant, one cook, one part-time assistant cook, six domestics and one full-time gardener/handyman, one part-time Attendant.

## STAFF TRAINING

Matron J. A. Jones of Ferndale House attended a course at Holyroode College, Manchester, in the care and attention of the aged, from 10th - 16th March, 1969.

## COMPULSORY REMOVALS OF PERSONS IN NEED OF CARE AND ATTENTION

No action was taken under Section 47 of the National Assistance Act, 1948, during the period under review.

### Annual Outing

31 of the Residents from Clydach Court travelled to Bristol Zoo for their annual outing. Thirty-three of the residents from Fairfield travelled to Aberavon and Twenty-five of the residents from Ferndale travelled to Barry.

In accordance with the usual procedure the Matrons and Warden made the necessary arrangements for travelling and catering. The money for these outings was provided out of your estimates.

### Annual Holiday

On the 24th April, 1968, eighteen residents, twelve from Fairfield and six from Clydach Court, in company with a number of residents from other Homes in the administrative area of Glamorgan County Council, spent a week's holiday at Weston-super-Mare.

### Amenities for Residents

The old people in our Homes are still encouraged to live as full a life as possible, and if they so wish to have interest in local activities they are encouraged to do so. Some of them attend our Social Centres for Blind of Handicapped, others our craft centre, whilst some attend local churches, chapels, etc. For those less ambulant, voluntary religious services, concerts, etc., are given at the Homes by various local organisations and individuals.

Newspapers and periodicals are provided, as are hairdressing, shaving services etc. Television and Radio are available and visitation from friends are encouraged. All services and benefits of the National Health Services are available and residents if they so wish, can retain their own G.P. although this is not always practicable.

During the period under review, members of your Social Welfare Officers, attended Ferndale House, once weekly, to give instruction to those wishing to take part in handicraft and pastime hobbies. This was a success, as long as a Welfare Officer was present but the purpose of the exercise was slightly defeated, by the fact that they did not continue with the crafts during the week, although all encouragement was given them by the Matron and staff.

The practice of local firms, organisations and the public, of making donations, has continued and it is noticeable how many of the residents look forward in particular to their gifts from the Harvest Thanksgiving of local Sunday Schools and Day Schools. To name the people and organisations that continue to take an active interest in the welfare of our residents would be impossible, but it is encouraging to note that this interest is on the increase, and in every case where organisations and individuals donate gifts or give of these services, it is the practice of the section to write to the people concerned, expressing thanks on your behalf.



### Charges of Accommodation

The standard charge for accommodation and amenities at your Homes is fixed annually by the County Council and is based on the actual cost of providing the service. During the period under review the standard charge was £12.17s.8d. per week

Residents whose income after allowing the statutory "pocket money" is insufficient to allow them to meet the full charge, pay a lesser amount. Every resident must however, pay a minimum charge prescribed by the Ministerial Regulations and, if necessary, the Ministry of Social Security's Supplementary Section will supplement a resident's resources for this purpose.

The minimum charge during this period is £3.12s.0d. and each resident is allowed to retain 18 shillings for personal spending. Each resident is also allowed 2s.0d. per week in lieu of sweets and tobacco out of the comforts fund which is provided by the County Council, thus making a total of a £1 per week pocket money.

### Human Aspects of the Service.

Elderly people whom local authorities may be required to admit to their Homes are usually those who cannot maintain themselves in their own homes even with full support from the available domiciliary services, but who do not need continuous nursing care, but may require help with dressing and other personal needs which can be given satisfactorily by unskilled staff. Many of the people who are admitted have become frightened or depressed through living alone, and it is encouraging to see how many, after a short period in a Home gain in their physical and mental health, companionship of one's own peers, proves to be a good cure.

Occasionally an emergency admittance has to be made, when a crisis arises in a family, or the person concerned just cannot cope alone any longer, these can sometimes prove to be very difficult, as elderly people cannot accustom themselves to big changes, others are admitted to our Homes from hospitals, as they are purely social problems, no longer in need of medical treatment, but perhaps have no family or homes to return to.

One feature of this service, which is appreciated by families who care for their aged relatives, is your 'short-term care' when the elderly person enters a home during a period that their family is on holiday or ill, because of this policy many families retain their relatives in their own homes, knowing that you appreciate the necessity of them having a 'break' particularly when there are children

Occasionally when there are very urgent applications, and no beds available, in any of your Homes, the County Council have helped by offering a vacancy in one of their Homes. Then the resident usually places his or her name on the transfer list, but unfortunately, a considerable time may elapse before you are in a position to offer a transfer.

## TEMPORARY ACCOMMODATION

Welfare authorities are required by Section 21(i)(b) of the National Assistance Act, 1948, to provide temporary accommodation for persons who are in urgent need thereof, being need arising in circumstances which could not reasonably have been foreseen or in such other circumstances as the authority may in any particular case determine.

There is no duty on any Authority to provide accommodation for families rendered homeless in foreseeable circumstances clearly attributable to their own short comings, e.g., eviction for rent arrears, unsatisfactory behaviour etc. However, on humanitarian grounds, your committee provides temporary accommodation for these families as a last resort, when you admit mothers and children only to Rhose Camp where they can spend a maximum period of six months. When notice of impending eviction is received, officers of the Children's Department, N.C.P.C.C. and the Welfare Services Section make every effort to prevent a family becoming homeless.

There is one noticeable change which has taken place in the last few years, since the reforms in the Rent Acts, it is now most rare for a family to be evicted for circumstances which could not reasonably have been foreseen, but unfortunately there is an increase in evictions for rent arrears and domestic disputes, often in the latter case, the Social Welfare Officer is able to avert the actual eviction and avoid admittance to Rhose Camp.

The Welfare Services Section, in association with the Welfare Services Department of Glamorgan County Council have a Fire and Flood Scheme under the provisions of which people can be provided with accommodation in communal premises, which are earmarked for this purpose throughout the Borough, the department also have emergency feeding stocks and supplies of beds and bedding etc., on call from County Supplies. During the period under review accommodation was not required, but emergency feeding had to be implemented in July, 1968, during the floods on the main road and mountainside streets of Trehafod, when gas and electricity amenities were broken. The meals were provided by the Borough Meals-on-Wheels Service to those residents requiring the service.

For your information, I set out below an example of a situation which had to be dealt with by the Welfare Services Section during this period.

- (a) After a domestic dispute when the husband used physical violence on both his wife and baby son in the early hours of the morning and later that day, ordered his wife and children to leave their home. The wife contacted the Health Visitor and N.S.P.C.C. Officer for the area concerned who offered to take the children into care - the wife would not part with the children and travelled to her husband's relatives in Rhondda with the intention to reside. The relatives for many reasons were unable to accommodate her for more than one night and having no relatives of her own, there was no alternative but to admit the wife and two children to Rhose Camp.



TEMPORARY INTERMEDIATE ACCOMMODATION

The needs of homeless families and, in particular those who have proved unsatisfactory tenants involve close co-operation between various departments and sections of this department, especially, Welfare, Children's, Housing and the Health Visiting Service.

The present policy is, that more emphasis must be made on the provision of intermediate accommodation with the main objective being to preserve the family as a unit, particularly when there is a husband, whilst, at the same time, allowing rehabilitative measures to be taken with a view to eventual rehousing.

At present the Rhondda Borough Council has seven such dwellings, and unfortunately, in most cases, the rehabilitation period is extensive.

The County Council has made use of their powers under Section 56 of the Local Government Act, 1958, to contribute towards the expenses of District Councils, (who are the Housing Authorities) as follows:

- (a) the whole of the approved loss incurred by the Housing Authority when intermediate accommodation is unoccupied.
- (b) half of the approved loss incurred by the Housing Authority during the period in which intermediate accommodation is occupied.

I now set out below an example of a situation which led to the admission of a family to Temporary Intermediate Accommodation.

A family of husband, wife and ten year old daughter, presented themselves at the local Police Station stating that they were homeless. When interviewed by a member of the Welfare Services Section and the Probation Officer, who also had an interest in this family, they stated that they had been living as illegal sub-tenants of a Council House rented by the wife's parents.

A family quarrel had occurred which resulted in the family walking out and spending the night in a local hotel. During the next few days considerable time was spent in helping this family to seek alternative accommodation. Unfortunately, this could not be found. The family stated they intended going to Weston-Super-Mare to leave the child in the care of her grandmother who resided there. Two days later they again presented themselves at the police station complaining that they were destitute and stating that they had now used up all their money on hotel bills and travelling expenses. In the early hours of the morning, mother and child were admitted to Rhose Camp.

Approximately a week later the family were allocated intermediate accommodation by the Housing Department. Furniture and housing equipment to enable them to move in was offered to them by a donor and arrangements were made to house this family. This family still remain in intermediate accommodation during the time of writing this report and are receiving support from the Welfare Services.

# THE HANDICAPPED PERSON

Under the provisions of the Scheme of Delegation with the Glamorgan County Council, Sections 29 and 30 of the National Assistance Act, 1948 places a duty upon the Rhondda Borough Council to :-

"Make arrangements for promoting the welfare of persons to whom this Section applies, that is to say, persons who are blind, deaf or dumb and other persons who are substantially and permanently handicapped by illness, injury, or congenital deformity or such other disabilities as may be prescribed by the Minister."

As at 31st March, 1969, the total number of persons in Rhondda Borough Registered in the main categories as Handicapped persons are as set out in the following table :

TABLE 69  
Details of Case Load at 31st March, 1969.

<u>Category</u>	
General Handicapped	937
Hard of Hearing	16
Deaf with Speech	32
Deaf without speech	8
Blind	338
Partially Sighted	<u>164</u>
Total	<u>1,495</u>

The following tables show the distribution by age grouping and sex of Registered Generally Handicapped, Hard of Hearing, Blind and Partially Sighted Persons.

TABLE 70  
Number of Handicapped Persons on Register

Deaf with Speech	8
Deaf without Speech	32
Hard of Hearing	16

Disability	Sex	0-16	16-29	30-49	50-64	65+
Deaf with Speech	M	-	-	2	2	0
	F	-	1	2	-	1
Deaf without Speech	M	1	6	4	2	3
	F	-	2	7	3	4
Hard of Hearing	M	-	-	-	1	2
	F	1	2	-	5	5
Generally Handicapped	M	12	35	84	194	201
	F	6	24	74	141	166
Totals as at 31st March, 1969.		20	70	173	348	382

TABLE 71

Total number of Partially Sighted Persons on Register  
Age Groups and Sex

	0-1	2-4	5-15	16-20	21-49	50-64	65 and over	Total
Males	-	-	5	3	9	7	34	58
Females	-	-	1	2	11	10	88	112
Totals	-	-	6	5	20	17	122	170

TABLE 72  
Register of Blind Persons as at 31st March, 1969

	0	1	2	3	4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80-84	85-89	90+	Total
Male	-	-	-	-	-	-	4	2	3	3	7	11	16	20	28	11	10	6	121
Female	-	-	-	-	-	-	-	2	3	3	6	24	9	23	69	38	23	17	217
Totals	0	0	0	0	0	0	4	4	6	6	13	35	25	43	97	49	33	23	330



## ESTABLISHMENT

### Appointment of Full-time Technical Assistant

In September, 1968, Mr. T. T. John took up his duties as a full-time Technical Assistant in Rhondda. The demand on this Officer's work is steadily increasing and a number of outstanding works of adaptation have now been completed.

Mr. John also undertakes the administrative procedure connected with this post and we now find that this function of the Department's work is running more efficiently.

Prior to this appointment being made, Mr. A. B. Cannon, County Technical Assistant was seconded for three days per week to Rhondda. He has now returned to full-time duties with the County Council.

### Resignation of Social Welfare Officer

On 14th September, 1968, Mrs. G. Williams, Social Welfare Officer resigned her post to enable her to attend a full-time Social Work Course at the Cardiff College of Commerce.

### Other Establishment Changes

The period under review, saw many changes in the staff and set up of the Welfare Services and it is hoped that these changes will portray more effectively the work of the section. In July, 1968, they moved from Tydfil House to their own premises at "Dan-y-Deri", Ystrad, which had been vacated by the Civil Defence. Changes in staff were also numerous, many through progression from Welfare Assistants to trainee Social Welfare Officers, and the appointment of extra Trainee Social Welfare Officers to bring up the full compliment of staff.

### Staff Training

In April, 1968, enquiries were made with Glamorgan County Council regarding the possible intraining of two Welfare Assistants and two trainee Welfare Officers. The current County intraining session at this time was nearing completion and it was necessary to provide a three week crash course of intraining in Rhondda for the four persons concerned.

Speakers came from various ministries and organisations and a very worthwhile course was provided during these three weeks.

In the autumn of 1968, four trainee Social Welfare Officers and two Home Teachers for the Blind commenced a course of intraining provided by Glamorgan County Council and held at Holly House, Pontypridd.

## GENERAL INFORMATION ON THE WELFARE OF THE HANDICAPPED PERSON

The day-to-day visitation of handicapped people in their homes continues to play a vital part in the operation of your Welfare Services. For the year ending 31st March, 1969, a total of 7,755 visits were made by your Social Welfare Officers.

Included in these visits was the home tuition in craft work by the Social Welfare Officer concerned.



The following extracts from reports give some idea of how much these visits are appreciated.

From a lady over 80 years of age - "I don't suppose I'll have any more visitors until you call again".

About a man who had received instruction in cane work. "Mr. L. had been able to give his canework articles as Christmas presents and this has given him a new purpose in life. He can now look ahead, and is already making gifts for next year."

"Mrs. P. who has lost all flexibility of the hips and neck due to spondylitis, is finding the recently issued CEE VEE Reacher to be of considerable benefit.

"Mrs. W. - a 74 year old housewife who suffers from severe arthritis of the back and legs now finds such chores as ironing clothes a less formidable task since receiving a high seated chair constructed at the County Workshops, Treforest.

#### GLAMORGAN BLIND WELFARE ASSOCIATION

This association received its financial resources from collections made by the Royal National Institute for the Blind in Glamorgan. It is administered by the Glamorgan County Council Special Services Sub-Committee.

It provides amenities for the home-bound, blind and also for Social Centre Activities. It also provides an annual summer outing and sponsors the Blind Eisteddfod which in 1968 was held at the Avon Lido, Aberavon.

This Eisteddfod is the high spot of the year for those Blind Persons who attend the Blind Centres.

A keen rivalry exists between the different Centres and this year, Treorchy Social Centre excelled itself by obtaining five first and one second prize.

#### AIDS AND MATERIALS ISSUED TO BLIND AND GENERALLY HANDICAPPED

Listed hereunder are details of aids and materials issued to the Blind and Generally Handicapped during 1968-69 :-

##### Handicraft Work

704 Craft Orders issued of which 24 were free issued

##### Total Value of Orders

Blind and Partially Sighted	-	£337
Handicapped	-	<u>£ 799</u>
Total		<u>£ 1,136</u>

##### Wireless for the Bedridden

2 Applications for wireless sets  
2 Licences paid for  
1 T.V. Licence paid for

##### Wireless for the Blind

3 Mains Wireless sets issued 1968/69  
23 Transistor Sets issued 1968/69  
51 Rentals payable on Talking Books 1968/69  
1 Radio Relay payable 1968/69.

Expenditure on repairs of Wireless sets - £2.11s.10d.  
(The majority of repairs were undertaken free of charge)

41 Certificates were issued for free wireless licences.

Periodicals (embossed) - 7

Car Badges for Disabled Drivers - No issues by R.B.C.  
4 Applications submitted to G.C.C.

Aids for the Blind

The Scheme of Welfare Services for the Blind provides for a loan of aids and implements to assist in overcoming this particular disability. The following articles, available at reasonable prices from the Royal National Institute for the Blind, have been purchased and issued on loan to blind persons :-

Braille Dominoes	...	...	...	...	2
Braille Playing Cards...	...	...	...	...	1
Needle Threaders	...	...	...	...	3
Self-Threading Needles..	...	...	...	...	29 Packets
Pension Book Guides	...	...	...	...	6
White Sticks	...	...	...	...	32
Writing Frames	...	...	...	...	11

### Employment and Training of Handicapped Persons

The number of Partially Sighted Persons in "Open" employment on the 31st March, 1969, was eight.

Three were employed in Workshops for the Blind. Six attending Special Schools and one person in training at the same time.

### Social/Handicraft Centres

Set out hereunder are details of the average weekly attendance at Social/Handicraft Centres and of the cost incurred of travelling expenses.

These figures give some indication of the value that handicapped persons place on these centres. Their true worth, however, is known only to those who attend, and to whom these places have become "a way of life".

#### AVERAGE WEEKLY ATTENDANCE AT SOCIAL/HANDICRAFT CENTRES

Ynyswen Blind	...	...	...	...	32
Porth Blind	...	...	...	...	40
Craft Class	...	...	...	...	28
Dancing Class	...	...	...	...	16
Deaf Centre	...	...	...	...	18

#### Centres for the Handicapped:

Maes-yr-Haf	...	...	...	...	29
Ynyswen	...	...	...	...	36
Y.M.C.A., Porth	...	...	...	...	29
Maerdy	...	...	...	...	39

The average weekly attendance of Blind Persons at Social/Handicraft Centres in Rhondda is 94.

The average weekly number of handicapped persons attending Social/Handicraft Centres in Rhondda is 155.

The average weekly number of deaf persons attending Centres for the Deaf in Rhondda is 18.

### Social/Handicraft Centres' Exhibition

Total Cost of travelling expenses (Centres) of Blind and Partially Sighted, and Guides. £354.14s. 7d.

Total Cost of travelling expenses (Centres) of Generally Handicapped £504. 2s. 6d.



Visits between Centres and Private Outings.

Physically Handicapped members of Centres have continued to visit other similar Centres under your authorisation. These visits are extremely popular and in the period under review four such visits were undertaken as follows :-

Ynyswen Deaf	to	Briton Ferry
Ynyswen Blind	to	Merthyr
Y.M.C.A.Porth	to	Barry
Arosfa, Porth	to	Briton Ferry

at a total cost of £43.

Additionally many similar Centre outings were held, the full cost of which was met from the Centre's private funds.

Activities at Centres

272 Blind and Partially Sighted Persons, and necessary guides, attended two summer outings during the Summer of 1968. The outings cost £157.

310 Blind and Partially Sighted persons and guides attended Christmas Parties at a cost of £227.

During the Summer of 1968, two outings were held for handicapped persons who regularly attended Social/Handicraft Centres. 202 persons, including necessary escorts, participated in outings to Barry at a total cost of £141.12s.0d.

At Christmas, 192 persons attended Christmas parties at a total cost of £139. Those persons who were unable to attend the Christmas party because of ill health etc., received a voucher to the value of 10s.0d. for the purchase of groceries the voucher being exchangeable at local shops.

In addition, every Registered Disabled Person, Blind or sighted received a Christmas card expressing seasonal greetings and good wishes.

WORKS OF ADAPTATION

During the period 1st April, 1968 - 31st March, 1969, a total of 41 works of adaptation were carried out to the homes of Blind, Deaf and Generally Handicapped persons. Work included re-positioning of toilets, access to existing toilets by ramps and handrails, alterations to existing bathroom and toilets etc. Deaf persons were provided with the installation of the 'Mountcastle Silent Bell System'.

In three cases, financial help was also provided by other organisations, e.g., Coal Industrial Social Welfare Organisation, Red Cross, etc.

No. of Adaptations and Category.

Blind and Partially Sighted	6
Physically Handicapped	32
Deaf and Hard of Hearing	<u>3</u>
Total	<u>41</u>



WELFARE OF THE DEAF AND HARD OF HEARING

During the period under review, the services of a specialised officer from the County were retained for the Deaf and Hard of Hearing. This officer attends, one day a week and visits those persons who are registered as either Deaf or Hard of Hearing.

A Social Centre is also provided weekly at the Ynyswen Welfare Hall. This Centre is held in the evening so that the members, many of whom are in the younger age group, and working, may attend.

Trips, social evenings and a Christmas dinner are also provided for these persons.

Inter-Centre visits are also made to similar Centres in other parts of the County.

WELFARE OF THE DEAF/BLIND

For those persons who are both deaf and blind, a Social Centre is organised by the Glamorgan Welfare Services Department and is held once a month at Holly House, Pontypridd. Each Deaf/Blind person attending is accompanied by a Social Welfare Officer with experience in the problems of the Deaf/Blind and who is able to communicate through the medium of the Deaf/Blind Manual Alphabet.

TABLE 73

Register of Handicapped Persons as at 31.3.69.

A.	DISABILITY	Rhondda
	General Classes:	
1.	Amputation - one arm	6
2.	Amputation - two arms	0
3.	Amputation - one leg	33
4.	Amputation - two legs	7
5.	Amputation - others	7
6.	Rheumatism and Arthritis	163
7.	Congenital Malformation	25
8.	Diseases of the Digestive System	8
9.	Diseases of the Genito/Urinary System	8
10.	Diseases of Heart	73
11.	Pneumoconiosis	113
12.	Bronchitis	45
13.	Diseases of Skin	0
18.	Injuries of Head and Trunk	15
19.	Injuries of Lower Limbs	48
20.	Injuries of Shoulder and Arm	9
21.	Injuries of Spine	37
22.	Neurosis	17
23.	Epilepsy	41
24.	Other Nervous Diseases	189
25.	Mental Deficiency	11
26.	Other Mental Disorders	8
27.	T.B. Pulmonary	18
28.	T.B. Surgical	13
29.	Others	43
		<u>937</u>
B.	Deaf with Speech	8
	Deaf without Speech	32
C.	Hard of Hearing	16
	TOTALS	993

TABLE 74

Register of Handicapped Persons as at 31.3.69.

Major Handicaps	0-16	16-29	30-49	50-64	65+	Total
1. Amputation	-	1	9	22	21	53
2. Arthritis or rheumatism	-	2	12	62	87	163
3. Congenital malform- ation	3	3	5	9	5	25
4. Diseases of the digestive and genito/Urinary System	-	3	26	89	129	247
5. Injuries	1	2	18	42	46	109
6. Organic Nervous	10	36	52	82	53	233
7. Neurosis	-	5	8	9	11	33
8. T.B. (Respiratory) Pulmonary	-	-	10	5	3	18
9. T.B. (Non-respiratory) Surgical	-	-	5	5	3	13
10. Diseases not specified above.	4	4	9	14	12	43
TOTALS	18	56	154	339	370	937

TABLE 75  
SOCIAL/HANDICRAFT CENTRES FOR THE BLIND, 1969.

Town	Venue	Day and Time	Social Welfare Officer	Activities	Average Attendance of Blind Persons & Guides	
					1967/68	1968/69
Porth	Porth and District Old People's Social Centre	Tuesday 2.30 p.m.	Mr. A. J. Wright	Social	40	40
Porth	Porth and District Old People's Social Centre	Tuesday 7.00 p.m.	Social Welfare Officers in turn	Dancing Class (integrated with Handicapped)	18	16
Porth	Porth and District Old People's Social Centre	Friday 2.00 p.m.	Social Welfare Officers in turn	Handicraft Class (integrated with Handicapped)	30	28
Treorchy	Ynyswen Social Welfare Hall	Wednesday 2.30 p.m.	Mr. E. Jones	Social	35	32

TABLE 76  
SOCIAL/HANDICRAFT CENTRES FOR THE HANDICAPPED, 1969.

Centre	Venue	Afternoon	Social Welfare Officer	Average Weekly Attendances	
				1967/68	1968/69
Trealaw	Maes-yr-Haf Education Settlement	Wednesday 2.00 p.m.	Mr. E. Jones	34	29
Porth	Y.M.C.A. Porth	Wednesday 2.00 p.m.	Mr. R. Morgan	36	29
Merdy	Workmen's Hall and Institute	Thursday 2.00 p.m.	Mr. I. L. Jones	58	41
Treorchy	Ynyswen Social Welfare Hall	Thursday 2.00 p.m.	Mr. D. Timmons	34	36
Porth Dancing Class	Old People's Social Centre	Tuesday 7.00 p.m.	Social Welfare Officers in turn	18	16



TABLE 77

Total Number of Visits paid during the  
Period 1st April, 1968 to the 31st March, 1969.

MEGAN HUGHES	216
E. T. JONES	897
EVAN JONES	423
I. L. JONES	855
JUNE JONES	93
RHYDFEN MORGAN	1,011
D. PHILPOTT	663
R. H. TAYLOR	176
D. TIMMONS	1,296
J. THOMAS	83
K. THOMAS	990
A. J. WRIGHT	<u>1,052</u>
TOTAL	<u>7,755</u>

TABLE 78

CASE LOAD OF SOCIAL WELFARE OFFICERS AS AT 31st MARCH, 1969.

District No.	Details of District	Social Welfare Officer (showing District of Residence)	Case Load			Responsible for
			Blind & P.S.	G.H.	Total	
1	Blaenrhondda, Blaencwm, Tynewydd, Treherbert and part of Ynyswen	Mr. D. G. Timmons (PENYGRAIG)	41	80	121	Ynyswen Centre for the Generally Handicapped - Tuesday
2	Part of Ynyswen, Treorchy and Pentre	Mr. R. Taylor, Trainee (LLWYNYPILA)	63	68	131	-
3.	Cwmparc, Ton Pentre, Gelli	Mrs. M. Hughes, Trainee (PORTH)	35	80	115	-
4	Part of Gelli, Ystrad, Llwynypia to Partridge Road, to Tonypandy Square.	Mr. E. M. Jones (TREORCHY)	48	96	144	Ynyswen Centre for the Blind - Wednesday
5	Blaenclydach, Clydach Vale, Tonypandy.	Mrs. J. Jones, Trainee (TON PENTRE)	43	105	148	-
6	Trealaw, Dinas, part of Penygraig	Miss J. Thomas, Trainee (COMBRIDGE)	48	86	134	-
7	Trebanog, Williamstown, Edmundstown, Penrhifler, part of Penygraig.	Mr. A. J. Wright (TREORCHY)	46	72	118	Porth Centre for Blind - Tuesday
8	Cymer, Trehafod, Porth, part of Ynyshir.	Mr. R. Morgan (MAERDY)	53	75	128	Porth Centre for the Generally Handicapped - Wednesday.
9	Part of Ynyshir, Wattstown, Stanleytown, Pontygwaith, part of Tylorstown, part of Porth, Mount Pleasant.	Mr. E. Jones, Trainee (CLYDACH VALE)	41	83	124	Maes-yr-Haf Centre for the Generally Handicapped - Wednesday
10	Ferndale, part of Tylorstown	Mrs. K. Thomas, Trainee (TON PENTRE)	45	104	149	-
11	Maerdy and Blaenllechau	Mr. I. L. Jones (FERNDALE)	39	88	127	Maerdy Centre for the Generally Handicapped - Thursday.
TOTALS:			502	937	1,439	

Social Welfare Officer (Deaf)	Hard of Hearing	Deaf with Speech	Deaf without speech	Total	Area	Responsible for Social Centres at
Mr. P. Dalladay	16	8	32	56	Rhondda	Treorchy



RHONDDA BOROUGH COUNCIL - COMMITTEE FOR EDUCATION

THE

A N N U A L R E P O R T

of the

BOROUGH SCHOOL MEDICAL OFFICER

to the

RHONDDA COMMITTEE FOR EDUCATION

FOR THE YEAR 1968





RHONDDA BOROUGH COUNCIL - COMMITTEE FOR EDUCATION

Councillor W. D. Hughes  
(Chairman)

Aldermen

A. Davies

E. M. Davies

J. I. Evans

D. E. Hughes

I. I. Jones

S. Mitchell, O.B.E., J.P., M.R.S.H.

D. Murphy

(Mrs.) C. M. Parfitt, J.P.

G. L. Wales, O.B.E., J.P.

Councillors

R. J. Ashman

C. G. Carroll

(Mrs.) M. E. Collins

H. L. Davey

D. C. Davies

(Mrs.) M. Davies

J. G. Elias

H. Fox

(Mrs.) P. H. Gard

W. J. Godfrey

H. R. Hicks

(Mrs.) O. J. Leebrook

R. C. Lendrum

J. H. Lewis

D. Morgan

R. C. Morris

R. Newman

(Mrs.) B. Nicholas

(Mrs.) A. Powell

D. L. Thomas

K. P. Thomas

A. True

Co-opted Members

K. S. Hopkins, M.A.

T. J. Davies

D. E. Powell

C. T. Taylor

D. F. Williams

County Aldermen

T. E. Hughes

E. G. James

W. Llewelyn, J.P.

County Councillors

A. Davies

A. M. Ellis

(Mrs.) C. McGrath, J.P.

(Mrs.) C. M. Richards

Clerk to the Committee:

Borough Education Officer:

Borough Architect:

W. Noel Thomas, Solicitor

W. Aylwyn Jones, B.Sc., Ll.B.

C. Gingell, A.R.I.B.A., A.R.I.C.S.

Borough School Medical Officer:

R. B. Morley-Davies,

M.B., B.Ch., B.Sc., D.P.H.

Deputy School Medical Officer:

J. A. Mason, M.B., B.Ch., D.P.H.

Assistant School Medical Officers:

J. Morris, M.B., B.Ch., D.C.H., B.Sc. (Part year)  
C. A. Adelaja, M.B., B.S. (Lond.) (Part year)

Sessional Medical Officers:

J. Williams, M.B., Ch.B., D.A., B.Sc.  
N. Osborn M.B., Ch.B.  
R. K. Majumdar, M.B., B.Ch., B.Sc., D.P.H., D.I.H. (Part year)

Ophthalmic Medical Practitioners (Sessional)

J. G. Mason, M.B., B.Ch., B.Sc.,  
A. L. Alban, M.R.C.S., L.R.C.P. (Lond.), D.O.M.S. (Lond.)

Consultant Psychiatrist:

K. W. Aron, M.B., Ch.B., D.P.M.

Educational Psychologist:

B. Tew, B.A., Dip. Psych.

Area Dental Surgeon :

M. James ap John, L.D.S., R.C.S.

Senior Dental Officer:

T. J. Pugh, B.D.S.

Sessional Dental Surgeon:

Alun R. Owen, L.D.S., R.C.S. (England)

Nursing Officer: Health Visitors and School Nurses

Miss M. B. Owen, S.R.N. (Queen's), R.F.N., H.V. Cert., S.C.M.

Speech Therapist:

Mrs. J. Barnes (Part year)  
Mrs. S. E. Demetriou (Part year)

Administrative Assistant:

Glan Evans, C.I.S.

The the Chairman and Members of the  
RHONDDA COMMITTEE FOR EDUCATION

Mr. Chairman, Ladies and Gentlemen,

I have the privilege to submit my Annual Report on the work of the School Health Service during 1968.

Unfortunately, the year was marked by further changes in the Medical Staff which again made continuity in programming of work impossible.

At the commencement of the year, Dr. O. Adelaja and Dr. J. Morris were employed as whole-time Medical Officers but Dr. Adelaja terminated her appointment on the 29th February and Dr. Morris left the service on the 4th August, 1968, leaving the Authority without a whole-time medical officer from that date until the end of the year.

We were fortunate, however, in securing the services of a Speech Therapist, albeit part-time, for the first time since March, 1960. Mrs. J. Barnes worked in this capacity until the end of September, being succeeded at that time by Mrs. S. E. Demetriou.

In view of the foregoing staffing position, it will be appreciated it was impossible to implement a full programme of work in the School Medical Service. In particular, a lack of full-time medical officers made it impossible for attention to be concentrated on the very special needs of handicapped children.

Yours faithfully,

R. B. MORLEY - DAVIES,

Borough School Medical Officer.

Health Services Section,  
Municipal Offices,  
PENTRE, Rhondda.

September, 1969.



## 1. Establishment of Medical Officers

The following medical officers were available for work within the school medical service during 1968 :-

- (1) Dr. J. Morris (Part year)
- (2) Dr. O. A. Adelaja (Part year)
- (3) Dr. J. Williams (Sessional)
- (4) Dr. N. C. Osborn (Sessional)
- (5) Dr. R. K. Majumdar (Sessional) (Part year)

The type of work carried out by session and individual doctor is shown in Table 1.

TABLE 1

Table showing distribution of doctor's time  
by type of work carried out

	Routine N.I.	B.C.G. Vacc.	Immun. and Polio Vacc.	M. & C.W.	<u>Others</u> School Clinics Dental Clinics Specials, etc.
(1) Dr. J. Morris	2	32	22	161	15
(2) Dr. O. A. Adelaja	15	-	3	63	7
(3) Dr. J. Williams	-	-	-	85	83
(4) Dr. N. C. Osborne	5	-	3	350	2
(5) Dr. R. K. Majumdar	44	-	-	25	10

## 2. Routine Medical Inspection

During 1968, this type of examination was again restricted to entrants and any pupils at Primary Schools who had not been previously examined. Table II shows the number of pupils examined by year of birth.

TABLE II

Distribution of pupils undergoing routine medical examination  
by year of birth and physical condition

Age Groups Inspected (By years of birth)	Physical condition of pupils inspected		
	No. of pupils inspected	SATISFACTORY No.	UNSATISFACTORY No.
1964 and later	153	153	-
1963 .....	350	350	-
1962 .....	198	198	-
1961 .....	47	47	-
TOTAL:	748	748	-

### 3. DENTAL TREATMENT

The staffing position as to dental officers remained constant during the year, the Authority being fortunate in having the services of Mr. M. James ap John, L.D.S., R.C.S., as Area Dental Officer and Mr. T. J. Pugh, B.D.S., as Senior Dental Officer, while Mr. Alun R. Owen, B.D.S., continued to serve one session weekly. The work undertaken is detailed in Table V of the Appendix to this report and reflects the greater emphasis on conservation treatment which has been achieved.

A dental auxiliary was appointed in September and this allowed the resumption of dental health education at schools visited by her for talks with the aid of film strips, etc. A special campaign was mounted in Infants' Schools in the Borough during the Christmas Term when dental health packs were issued to the classes wherein attend the five-year-olds and short talks were given by the school nurses or the dental auxiliary. It is hoped to maintain a similar programme annually in respect of new entrants each Christmas Term.

### 4. DEFECTIVE VISION

During 1968, 1,659 children were examined at local authority refraction clinics compared with 1,756 in the previous year and 612 prescriptions for glasses were issued.

127 children were referred for further investigation by the Consultant Ophthalmologist at Llwynypia Hospital.

## 5. Speech Therapy

In December 1967, the Authority secured the services of a speech therapist on a part-time basis, for four sessions a week for the greater part of the year, increasing to six sessions a week from the end of September 1968.

223 children were seen by the Speech Therapist for diagnosis and all but five were referred for treatment, entailing weekly attendance at clinic for periods extending in some cases to many months. 126 children attended for treatment and 36 failed to attend when called for treatment after initial diagnosis, leaving 56 children awaiting treatment at the end of the year.

The following table analyses the symptoms of cases treated :-

TABLE III

SYMPTOMS OF CASES TREATED AT CLINICS

Stammering	32
Dyslalia	62
Cleft Palate	4
Deafness	1
Lateral "s"	5
Interdental "s"	4
Rhinolalia (nasality)	5
Dysarthria	-
Dysphonia	-
Low I.Q	3
Retarded Speech	10
Aphasia	-

126

6. Infectious Disease

Table IV shows numbers of notifications of various diseases amongst children during the year.

TABLE IV

Cases of Infectious Disease Notified  
during 1968. (Under 15 years)

<u>Notifiable Disease</u>	<u>Total</u>
Scarlet Fever .. .. .	21
Whooping Cough.. .. .	67
Acute Poliomyelitis, Paralytic.. ..	-
Acute Poliomyelitis, Non-Paralytic.. ..	-
Measles .. .. .	633
Diphtheria .. .. .	-
Dysentery .. .. .	-
Meningococcal Infection .. .. .	-
Ophthalmia Neonatorum .. .. .	-
Acute Pneumonia, Influenzal .. .. .	-
Acute Pneumonia, Primary .. .. .	8
Smallpox .. .. .	-
Acute Encephalitis, Post Infectious. ..	-
Acute Encephalitis, Infective .. .. .	-
Enteric or Typhoid Fevers .. .. .	-
Erysipelas .. .. .	-
Food Poisoning.. .. .	-
Puerperal Pyrexia .. .. .	-



## 7. Prevention of Tuberculosis

The annual visit to schools for the skin testing and B.C.G. vaccination of school children aged 13 years and over was undertaken during the Spring term and the following table shows the work done during 1968.

TABLE V

Table giving details of B.C.G. Vaccination  
in children aged 13 years and over

School or Further Education Establishment	Number of parental consents requested	Accepted B.C.G.		Mantoux Test			Number given B.C.G
		No.	%	*No. Tested	No. -ve.	% -ve.	
Blaenclydach C.S. (Boys)	59	39	66.1	26	22	84.6	22
Blaenclydach C.S. (Girls)	80	69	86.3	42	38	90.5	38
Bodringallt C.S.	120	78	65.0	51	50	98.0	49
Craig-yr-Eos C.S. (Boys)	91	59	64.8	46	43	93.5	43
Craig-yr-Eos C.S (Girls)	90	85	94.4	51	48	94.1	47
Cymmer C.S	149	85	57.0	44	39	88.6	39
Ferndale C.S. (Boys)	109	81	74.3	43	40	93.0	40
Ferndale C.S. (Girls)	90	81	90.0	37	35	94.6	35
Hendrefadog C.S.	107	93	86.9	55	53	96.4	53
Islwyn C.S. (Boys)	47	25	53.2	16	16	100.0	16
Llwyncelyn C.S.	65	53	81.5	37	35	94.6	34
Porth County (Girls)	149	132	88.6	101	99	98.0	99
Porth Grammar-Tech.	172	150	87.2	97	92	94.8	92
Tonypandy Grammar	164	154	93.9	110	100	90.9	100
Trealaw C.S.	80	53	66.3	40	38	95.0	38
Ynyshir C.S. (Girls)	54	46	85.2	30	29	96.7	29
Upper Rhondda C.S.	412	193	46.8	121	104	86.0	104
Totals	2,038	1,476	72.4	947	881	93.0	878

\*No. tested excludes children who were found on testing to have had B.C.G. vaccination previously. There were 222 such children, all of whom gave positive re-actions.

## 8. Child Guidance

During 1968, 268 children were seen by Dr. K. W. Aron, Consultant Child Psychiatrist for Glamorgan, who holds regular clinics at Carnegie Welfare Centre, Trealaw.

Close co-operation continues to be maintained with Mr. Brian Tew, Educational Psychologist, who became established during the year at his new centre at Penygraig.

## 9. Hospitalised Accidents in Childhood

As from the 1st July, 1961, reports of hospitalised accidents in childhood have been made the subject of detailed follow-up. This enables the Health Visitors to re-emphasise the continued need for vigilance in the prevention of accidents at this age. Some of the data obtained has been tabulated in the following three tables with comparative data for 1966 and the six previous years.

TABLE VI

Table showing age and sex distribution of hospitalised accidents

Age Group Years	Male			Female			Total		
	1961-66	1967	1968	1961-66	1967	1968	1961-66	1967	1968
0 -	10	-	1	7	-	-	17	-	1
1 -	159	6	12	98	9	12	257	15	24
5 -	118	8	5	61	2	1	179	10	6
10 - 15	77	-	7	42	3	1	119	3	8
All Ages	364	14	25	208	14	14	572	28	39

TABLE VII

Table showing distribution of accidents by day of occurrence

Day of Week	No. of Accidents		
	1961-66	1967	1968
Monday	78	5	1
Tuesday	87	3	6
Wednesday	71	4	5
Thursday	88	4	5
Friday	83	4	6
Saturday	93	4	7
Sunday	72	4	9
Totals:	572	28	39

TABLE VIII

Table showing distribution of hospitalised accidents by place of occurrence

A. Accidents at home - 26

(1) <u>Inside</u>		(2) <u>Outside</u> (Garden, etc.)	
a. basement	-	a. rear	4
b. ground floor	17	b. front	-
c. upper floor	5		

The injuries sustained fall into the following groups :-

a. Falls	....	4
b. Burns and Scalds		-
c. Others	....	22

B. Accidents outside home - 13

(1) In the roadway - 9, eight of which were due to falls, and one of which was due to wounding.

(2) Vehicular injuries - 1, of which the association vehicle is shown below.

a. Pedal cycle	- 1	d. 'Bus	- -
b. Motor cycle	- -	e. Goods Vehicle	-
c. car	- -		

(3) Playground Injuries - 2

The nature of injury is shown below with comparative data for 1961 - 1966 and 1967.

Nature of Injury	No. affected		
	1961 - 1966	1967	1968
Contusion .. ..	-	-	2
Concussion .. ..	5	3	3
Fracture .. ..	148	1	6
Dislocation and Sprain .. ..	62	-	-
Internal Injury ..	43	-	1
Wounds and Lacerations ..	272	10	6
Foreign Bodies in Orifice .. ..	42	14	2
Ingestion of Foreign Bodies .. ..	-	-	18
Superficial .. ..	-	-	1
Total .. ..	572	28	39

STATISTICAL APPENDIX

TABLE I

MEDICAL INSPECTION OF PUPILS ATTENDING  
MAINTAINED PRIMARY AND SECONDARY SCHOOLS

A. PERIODIC MEDICAL INSPECTIONS

Number of Inspections in the prescribed groups:

Entrants	748
Second Age Group	-
Third Age Group	-
Totals:	748

Number of other Periodic Inspections	-
Grand Total	748

B. OTHER INSPECTIONS

Number of Special Inspections	378
Number of Re-Inspections	151
	529

C. PUPILS FOUND TO REQUIRE TREATMENT

NUMBER OF INDIVIDUAL PUPILS FOUND AT PERIODIC MEDICAL INSPECTION TO REQUIRE  
TREATMENT (Excluding Dental Disease and Infestation with Vermin)

Age Groups Inspected (1)	For Defective Vision (excluding squint) (2)	For any of the other conditions recorded in TABLE III (3)	Total Individual pupils (4)
Entrants	-	21	21
Second Age Group	-	-	-
Third Age Group	-	-	-
Total:	-	21	21
Additional Periodic Inspection	-	-	-
Grand Total	-	21	21



- 10 -  
TABLE 1 (Cont.)

D. CLASSIFICATION OF THE PHYSICAL CONDITION OF PUPILS  
INSPECTED IN THE AGE GROUPS RECORDED IN TABLE I.A.

Age Groups Inspected	Number of Pupils Inspected	Satisfactory		Unsatisfactory	
		No.	% of Col. (2)	No.	% of Col. (2)
(1)	(2)	(3)	(4)	(5)	(6)
Entrants	748	748	100.0	-	-
Second Age Group	-	-	-	-	-
Third Age Group	-	-	-	-	-
Total	748	748	100.0	-	-

Table II  
INFESTATION WITH VERMIN

(i)	Total number of individual examinations of pupils in schools by the school nurses or other authorised persons.	23,220
(ii)	Total number of individual pupils found to be infested	458
(iii)	Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2) Education Act, 1944)	-
(iv)	Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3) Education Act, 1944)	-

TABLE III

RETURN OF DEFECTS FOUND BY MEDICAL INSPECTION IN THE YEAR

Defect or Disease (1)	PERIODIC INSPECTIONS		SPECIAL INSPECTIONS	
	Requiring Treatment (2)	Requiring Observation (3)	Requiring Treatment (4)	Requiring Observation (5)
Skin	1	36	-	-
Eyes				
a. Vision	-	5	-	1
b. Squint	2	19	-	1
c. Other	1	4	-	-
Ears				
a. Hearing	1	13	1	13
b. Otitis Media	3	9	-	-
c. Other	-	8	-	-
Nose or Throat	10	204	-	31
Speech	3	8	-	1
Lymphatic Glands	-	74	-	1
Heart	-	7	-	2
Lungs	-	21	-	-
Development				
a. Hernia	-	-	-	-
b. Other	-	7	-	1
Orthopaedic				
a. Posture	-	2	-	-
b. Feet	1	69	-	1
c. Other	-	22	-	2
Nervous System				
a. Epilepsy	-	5	-	2
b. Other	1	6	-	-
Psychological				
a. Development	-	1	-	-
b. Stability	-	4	-	-
Abdomen	-	-	-	-
Other	-	40	-	2

TABLE IV

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS

GROUP 1 - EYE DISEASE, DEFECTIVE VISION AND SQUINT

	Number of Cases known to have been treated
External and other, excluding errors of refraction and squint	-
Errors of refraction (including squint)	1,659
Total ...	1,659
Number of pupils for whom spectacles were prescribed	612

GROUP 2 - DISEASES AND DEFECTS OF EAR, NOSE AND THROAT

	Number of Cases known to have been treated
Received operative treatment:	
a) for disease of the ear	-
b) for adenoids and chronic tonsillitis	16
c) for other nose and throat conditions	-
Received other forms of treatment	51
Total ...	67

GROUP 3 - ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of Cases known to have been treated
Number of pupils known to have been treated at clinics or out-patients departments	47

GROUP 4 - CHILD GUIDANCE TREATMENT AND SPEECH THERAPY

	Number of Cases known to have been treated
Pupils treated	
a) Under Child Guidance arrangements	268
b) Under Speech Therapy arrangements	126
Total ...	394

GROUP 5 - OTHER TREATMENT GIVEN

	Number of Cases known to have been treated
a) Miscellaneous minor ailments	-
b) Other	
1. Genito Urinary System ...	80
2. Digestive System ...	76
3. Infections ...	63
4. Epilepsy ...	26
5. Other Medical Conditions	219
6. Accidents ...	35
7. Minor Surgical Conditions	4
Total ...	503



TABLE V

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY AUTHORITY

A. ATTENDANCES AND TREATMENT

	<u>Ages</u> <u>5 to 9</u>	<u>Ages</u> <u>10 to 14</u>	<u>Ages</u> <u>15 &amp; over</u>	<u>Total</u>
First visit ...	1,248	873	169	2,288
Subsequent visits ...	1,627	1,577	308	3,512
Total visits ...	2,875	2,450	475	5,800
Additional courses of treatment commenced	201	136	26	363
Fillings in permanent teeth	1,134	2,868	717	4,719
Fillings in deciduous teeth	2,139	244	-	2,383
Permanent teeth filled ...	794	2,211	605	3,610
Deciduous teeth filled ...	1,754	184	-	1,938
Permanent teeth extracted	166	377	67	610
Deciduous teeth extracted..	1,291	249	-	1,540
General anaesthetics ...	541	185	12	738
Emergencies ...	231	121	20	372

Number of Pupils X-rayed	343
Prophylaxis	711
Teeth otherwise conserved	934
Number of teeth root filled	308
Inlays	10
Crown	43
Courses of treatment completed	1,557

<u>B. ORTHODONTICS</u>	Cases remaining from previous year	58
	New cases commenced during year	87
	Cases completed during year	52
	Cases discontinued during year	2
	No. of removable appliances fitted	133
	No. of fixed appliances fitted	1
	Pupils referred to Hospital	
	Consultant	4

<u>C. PROSTHETICS</u>	<u>5 to 9</u>	<u>10 to 14</u>	<u>15 &amp; over</u>	<u>Total</u>
Pupils supplied with F.U. or F.L. (first time)	-	-	-	-
Pupils supplied with other dentures (first time)	-	2	1	3
Number of dentures supplied	-	2	1	3

<u>D. ANAESTHETICS</u>	General anaesthetics administered by:	(i) Dental Officers	7
		(ii) Medical Officers	731

<u>E. INSPECTIONS</u>		
(a) First inspection at school. Number of Pupils		248
(b) First inspection at clinic. Number of Pupils		2,477
Number of (a) + (b) found to require treatment		2,636
Number of (a) + (b) offered treatment		2,516
(c) Pupils re-inspected at school clinic		404
Number of (c) found to require treatment		288

<u>F. SESSIONS</u>	Sessions devoted to treatment	847
	Sessions devoted to inspection	46
	Sessions devoted to Dental Health Education	28

TABLE VI

HANDICAPPED PUPILS NEEDING SPECIAL EDUCATIONAL  
TREATMENT AT SPECIAL SCHOOLS OR BOARDING  
HOMES

Category of Handicap	Ascer- tained during year	Placed during year	No.at Special Schools or Boarding Homes in January, 1969	No. awaiting places at Special Schools or Boarding Homes
A. Blind	-	1	4	-
B. Partially Sighted	1	-	8	-
C. Deaf	-	-	3	-
D. Partially Hearing	-	2	5	-
E. Physically Handicapped	1	2	11	-
F. Delicate	-	-	-	1
G. Maladjusted	2	-	1	1
H. Educationally Subnormal	9	8	23	4
I. Epileptic	-	-	-	-
J. Speech Defects	-	-	-	-
Total	13	13	55	6







